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SEASONAL FARMWORKER POWERLESSNESS

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HEARINGS

BEFORE THE

SUBCOMMITTEE ON MIGRATORY LABOR

OF THE

COMMITTEE ON
LABOR AND PUBLIC WELFARE
UNITED STATES SENATE

NINETY-FIRST CONGRESS

FIRST AND SECOND SESSIONS

ON

WHO IS RESPONSIBLE?

JULY 20, 1970

PART 8–A

Printed for the use of the Committee on Labor and Public Welfare

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Format of Hearings on Migrant and Seasonal Farmworker Powerlessness

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Part 2 : The Migrant Subculture	July 28, 1969.
Part 3–A : Efforts To Organize	July 15, 1969.
Part 3–B : Efforts To Organize	July 16 and 17, 1969.
Part 4–A : Farmworker Legal Problems	Aug. 7, 1969.
Part 4–B : Farmworker Legal Problems	Aug. 8, 1969.
Part 5–A : Border Commuter Labor Problem	May 21, 1969
Part 5–B : Border Commuter Labor Problem	May 22, 1969
Part 6–A : Pesticides and the Farmworker	Aug. 1, 1969
Part 6–B : Pesticides and the Farmworker	Sept. 29, 1969
Part 6–C : Pesticides and the Farmworker	Sept. 30, 1969
Part 7–A : Manpower and Economic Problems	April 14, 1970
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MIGRANT AND SEASONAL FARMWORKER POWERLESSNESS

(Who Is Responsible?)

MONDAY, JULY 20, 1970

U.S. SENATE,
SUBCOMMITTEE ON MIGRATORY LABOR
OF THE COMMITTEE ON LABOR AND PUBLIC WELFARE,
Washington, D.C.

The subcommittee met at 9:30 a.m., pursuant to call, in room 318, Old Senate Office Building, Senator Walter F. Mondale (chairman of the subcommittee) presiding.

Present: Senators Mondale (presiding), Yarborough, and Saxbe.

Committee staff members present: Boren Chertkov, counsel.

Senator MONDALE. The subcommittee will come to order.

This morning the Migratory Labor Subcommittee begins the eighth in a series of hearings on "Migrant and Seasonal Farmworker Powerlessness."

Today, we begin hearings with the conscience of a Nation awakened to our cause. Last week's remarkable NBC–TV documentary "Migrants—An NBC White Paper," has created an atmosphere of outrage and revulsion over the desperate plight of hundreds of thousands of our fellow citizens who have systematically been denied the status, the rights, the pride, the human decency, and the reward for their labor which we hold to be the birthright of all Americans.

We saw the documented evidence of the squallor, degradation, and racism which our Nation bestows upon the migrants. We saw the helplessness, fear, and frustration of a people whose only hope is for their children to escape the fate into which they were born. And we saw, most tragically, these children—underfed, poorly clothed, deprived and isolated—falling further behind in school and falling further into the hopeless trap of the migrant stream.

A migrant camp is a microcosm of nearly every social ill, every injustice, and everything shameful in our society: poverty almost beyond belief, rampant disease and malnutrition, racism, filth and squalor, pitiful children drained of pride and hope, exploitation and powerlessness, and the inability or unwillingness of public and private institutions, at all levels, to erase this terrible blight on our country.

This is not the first time that the shame of America has come to us in prime time. Ten years ago, a similarly remarkable documentary called "Harvest of Shame" was nationally televised; and still another, "What Harvest for the Reaper," has been produced since then.

Perhaps our greatest shame is how little we have done in this decade. We know the problems. In this subcommittee alone, we have had seven series of hearings—on the life of the migrant as described by the farmworker himself, the reasons for the successes and failures of union and community organization efforts, the border commuter problem, legal problems, the effects of pesticides on the farmworker, the economic and manpower issues.

We must now turn to the question of why we have accomplished so little.

What are the powers, the pressures, the politics, and the special interests that have perpetuated this degradation? Who has opposed the investigations of these conditions, and who has endeavored to suppress the truth? And who has worked to oppose the legislation or frustrate the administration of programs which might at least begin to meet the problems that are now so well documented?

This morning, we begin with a panel of doctors, Dr. Raymond Wheeler, Charlotte, N.C.; Dr. Harry Lipscomb, Houston, Tex.; Dr. Ramiro Casso, McAllen, Tex,; and Dr. Gordon Harper, Boston, Mass., who comprised part of a team of distinguished doctors who dealt with the health problems of migrants and their families.

We begin with Dr. Wheeler.

STATEMENT OF RAYMOND M. WHEELER, M.D., INTERNIST, CHARLOTTE, N.C.

Dr. Wheeler. Thank you, Senator Mondale.

Before I begin, I would like to introduce to the committee my medical colleagues who are with me today.

On my left is Dr. Harry Lipscomb of Houston.

On my immediate right, Dr. Ramiro Casso, McAllen, Tex.; and Dr. Gordon Harper of Boston.

I am a physician engaged in the private practice of internal medicine in Charlotte, N.C.

I am a member of the American Medical Association, a Fellow of the American College of Physicians, and am certified as a specialist in internal medicine by the American Board of Internal Medicine.

I am also president of the Southern Regional Council, an organization of black and white southerners, who for 25 years have sought and worked for equal opportunity for all citizens of the southern region.

During the past 3 years, I have studied the health and living conditions of the poor in North Carolina, Mississippi, Alabama, Florida, southwest Texas, Appalachia, and in the ghettos of northern cities.

I have examined children, talked to their parents, and visited their homes and schools.

I have served as a member of the Citizens' Board of Inquiry into Hunger in the United States, which published the report entitled "Hunger, U.S.A."

I have testified before committees of both the House and Senate of the United States concerning the existence of hunger and malnutrition throughout this country.

In January and again in April of this year, I traveled with other medical colleagues in southern Florida observing the health and living conditions of migrant farmworkers. In March of this year, my colleagues here today and I visited Hidalgo County in southwest Texas. We were part of a medical team of about 25 physicians, medical students, and technicians. There we spent 5 days examining farmworkers and their families, talking with them and other members of the community, and visiting homes and labor camps in which the people live.

Beginning with our visits to Mississippi and Alabama in 1967 and including our trips to Florida and southwest Texas this year, the efforts of all the physicians involved in this work have been sponsored and encouraged by the Field Foundation.

The purpose of our studies and our reports have always been the same. We have sought to observe and study the life situations of children of the poor, in order to bring their conditions to national attention. Their condition is one of sickness and poverty, isolation and neglect, indifference and exploitation, resulting in tens of thousands of children who exist in our country today without hope, denied their basic rights as human beings, and condemned to lives of pain, frustrations, and despair. In our minds, there can be no question about this fact.

It seems equally certain that this tragic situation is directly related to another. In our affluent, money-oriented society, human needs of children have been subordinated to political and economic interests.

Senator MONDALE. Would you yield there, Doctor?

I think that is a point that is often ignored. We like to say of ourselves that we are a child-oriented society. We hear about that all the time. But I have heard from many others like you who have dealt with the problems of the disadvantaged in American society, and they have all come up with the same conclusion you have—that really we show very little concern, if any, for the children of the poor.

They are, of course, the most tragic victims of all. They have no way of fighting back. They have no way of obtaining their own food, or their own housing, or in other ways taking care of themselves. They have no way to demand a quality education. As a result, we mangle and destroy thousands of them, millions of them, in a very cruel way.

If we were truly a child-oriented society, that would have stopped decades ago.

Dr. WHEELER. I certainly agree, Senator.

It would not be consistent with our beliefs or our purpose to portray those interests as intrinsically evil. Rather, we see them as basically uninformed, insensitive, and uncaring about the vast and irreparable harm that is being done not only to children, but to the very fabric of a society in which these children must live and take their places as adult citizens.

Wherever we went, in the south, the southwest, Florida, or Appalachia, the impact was the same—varying only in degree or in gruesome detail.

We saw countless families with large numbers of children, isolated from the mainstream of American culture and opportunity, possessing none of the protections of life and job and health which other Americans take for granted as rights of citizenship.

If the farmworker is injured in the field or if he becomes ill from exposure to pesticides—we heard of and saw many instances of both situations—he does not receive workmen's compensation. If he is sick or cannot find work—and there are many days when work is not available—he does not receive unemployment insurance. There is no realistic minimum wage to guarantee him adequate pay for his work.

If social security payments are deducted from his wages, few records are kept by the crew boss on which he can later base a claim.

He has no health or hospital insurance to provide him with even minimal medical care and he does not earn enough to purchase it.

The farmer is not even prohibited from working young children in the fields if the parents, desperate for enough money to buy food and shelter, chose to take their children out of school or bring along their pre-school-age children to pick the vegetables.

We saw housing and living conditions horrible and dehumanizing to the point of our disbelief. In Florida and in Texas, we visited housing projects, built with public funds, which defy description.

We saw living quarters constructed as long cinder block or wooden sheds, divided into single rooms by walls which do not reach to the ceilings. Without heat, adequate light or ventilation, and containing no plumbing or refrigeration, each room—no larger than 8 by 14 feet—is the living space of an entire family, appropriately suggesting slave quarters of earlier days. I doubt if the owners of fine racing horses or dogs along the east Florida coast would think of housing their animal property in such miserable circumstances.

We saw many different kinds of housing and perhaps some of the worst from the standpoint of structural soundness—owned by those who lived there—did not create in me the feeling of outrage that some of the so-called better housing did.

For example, in Dade County, we looked at quarters operated by the Homestead Housing Authority with public funds. There someone had sat down at a drawing board and deliberately and callously designed a living unit which consisted of a single room with concrete block walls, divided partially by a block partition which jutted out in the center of the room. There was one door and one small window high up under the ceiling. The room was dark and damp at midday. There was nothing in that unit to make it habitable.

There was not one gesture toward providing either comfort or basic human needs—no source of water, no toilet, no refrigeration, no heat, and the lighting was so dim that no child could have possibly been able to read or study.

This was the creation of a public authority, a place in which it was willing for other human beings to live.

Senator MONDALE. How old was that housing unit?

Dr. WHEELER. It was fairly old. As I recall, perhaps 30 years.

Senator MONDALE. I noted on my visits that a lot of these so-called housing units were built in the mid-1930's. The Farm Security Administration was responsible for some of that construction. They are, as you have described them, unbelievable places for human beings to live. Yet, for those 30 or 35 years they have been making money off that housing. They still charge very high rents.

There is very little upkeep, and practically no effort to make them habitable. Not only are these units miserable, but, in addition, the local governments are making money on them. It is the only place that the migrants have to live. They are being charged very high prices.

Dr. Wheeler. As I recall, one of the mothers that we talked with who lived in one of the places I just described told me she paid $14 or $15 a week.

Senator Mondale. That sounds like a standard charge. And, nothing goes to the tenant, under these circumstances, except very bad housing.

I got the impression that the last time this Nation was concerned about migrants was in the middle 1930's. I remember one farmworker who told that their housing was built after Eleanor Roosevelt visited. They built some nice housing. They would like to have another liberal visit and get some more housing.

You see this all over the country: California, Texas, Florida. The last time there was any substantial migrant housing built, as rotten as it is, was probably in the middle 1930's.

Have you noticed that?

Dr. Wheeler. We saw very little in the way of new housing.

I recall in this particular Homestead, Fla., development they were building a few on the periphery of the camp. There was very little new housing in evidence at the places I visited.

Senator Mondale. The only place I saw new housing was outside of Delano because the tenants struck because they were living in small corrugated shacks that were built after Mrs. Roosevelt visited 30 years ago. A grown man could not stand up in them. You can imagine what that is like in the summer, two little holes in each side, what they call windows, I guess.

These families were cramped in there. They were paying fantastic rents. They finally had a rent strike, and the county then built some new housing.

Senator Yarborough. Dr. Wheeler, Senator Mondale, the chairman of this subcommittee, and I visited a number of Colonias in Cameron and Hidalgo County in the past few months. Back of that screen of briar and thornbush out in front is a kind of thornbush curtain that can be 100 yards from the highway and the traveling public on the major U.S. highway traveling for years never dreamed that those Colonias existed.

When we went in there, we were told we were the first legislators who had ever been in there from either a congressional or a State legislative committee.

We found the conditions of sanitation and ill health—not being doctors, we could not judge the ill health except from seeing them and talking to the people and having them tell us about it but we could see conditions of sanitation and the other things there that you are describing.

I was not with Senator Mondale in Florida. But these we saw in my home State when we went there. We inquired about the health programs we enacted. We found not even a registered nurse came into those Colonias to look at the people.

So, you have people listening who have seen some of these things with their own eyes. We listen with great interest and a great hope of doing something about it.

Dr. WHEELER. I share that hope.

Senator MONDALE. Please proceed, Dr. Wheeler.

Dr. WHEELER. I think while we are talking about housing it would be helpful for us to think about the effects on a child who has to live in one of these poorly ventilated, poorly lighted one-room dwelling units, aside from the physical health, the physical discomfort of the heat, the cold, and dampness.

The absence of fresh air and the crowding greatly increases the likelihood of transmission of contagious disease. This is why so many have tuberculosis as well as chronic respiratory infections.

How is it possible for a child to study and perform in school when it is impossible for him to read by the light available to him? How can he possibly be emotionally well adjusted when he has no privacy, when he lives in a cage? How can he possibly stay awake in school the following day when he has attempted to sleep in a bed with three or four of his brothers and sisters?

How can this be, in a society such as ours, with the values we are presumed to cherish?

In all of the areas we visited, the nearly total lack of even minimally adequate medical care and health services was an early and easily documented observation. Again, that which most Americans now agree to be a right of citizenship, was unavailable to most of the people whom we saw.

The standard procedure of requiring cash for services and a cash deposit before hospital admission, places an impossible burden upon those least able to afford the high cost of being sick. Documentation of discrimination in medical services and denial of medical care will be described during the course of the hearings.

We saw hundreds of people whose only hope of obtaining medical care was to become an emergency which could not be turned away. We heard countless stories of driving 50 or 100 miles to a city general hospital after refusal of care at a local hospital.

Mexican-American citizens of the United States told us of crossing the border into Mexico for dental and medical treatment which was less expensive and for care which was considered to be kinder, more humane than they could obtain in their own communities.

We heard of diagnoses and treatment by nurses, endless waiting for simple procedures such as immunization of small children, and degrading treatment by medical personnel.

A few statistics substantiate our observations. The migrant has a life expectancy 20 years less than the average American. His infant and maternal mortality is 125 per cent higher than the national average.The death rate from influenza and pneumonia is 200 percent higher than the national rate and from tuberculosis, 250-percent higher than the national rate. The accident rate among migrant farmworkers is 300 percent of the national rate.

We know from these statistics alone that the migrant and seasonal farmworkers live shorter lives, have more illnesses and accidents, lose more babies, and suffer more than the rest of us. Everything that we saw and heard in Florida and southwest Texas bore out this knowledge.

From the moment we set foot in Hidalgo County until we departed, our medical team was engulfed by a seemingly endless procession of distraught and anxious parents, bringing their elderly relatives and their families of six, eight, or 10 children—seeking medical treatment which they could not obtain in their own communities.

Senator MONDALE. Doctor, can you tell us, just briefly, how this medical team proceeded? Was there a public announcement that medical examinations would be made available and then in response to this the migrants and their families arrived? How were the people told of your availability?

Dr. WHEELER. I think Dr. Casso might be able to answer that since he was there before the team arrived and is perhaps more familiar with the exact mechanism of how the information was disseminated than I.

Dr. CASSO. I am not familiar with just how people were advised that this was going to happen. But there will be other witnesses later on, perhaps Mr. Fernandez and Mr. Dunwell, who perhaps will be more knowledgeable than I about that.

Senator MONDALE. Dr. Casso, didn't you testify before the Health Subcommittee at McAllen?

Dr. CASSO. I testified at the Edinburg, Tex., hearings, yes.

Senator MONDALE. Proceed.

Dr. WHEELER. In partial answer to your question, some of the community leaders in the Colonias knew we were coming and told their people about it. After we got there, the word spread very rapidly. There was some television coverage over the local station and the radio and in the newspapers. It seemed to be adequate in view of the number of people who turned out.

Senator MONDALE. Could you make an estimate of how many people you saw and treated?

Dr. WHEELER. I believe we saw about 1,400.

Senator MONDALE. Did you give them treatment as well as examinations?

Dr. WHEELER. We tried to treat some of the sickest people. We had very little in the way of facilities for treatment and for follow-up care. But we were able to give some care and make prompt referrals of some of the sickest people we saw.

Senator MONDALE. How many doctors were on the team?

Dr. WHEELER. There were 15 doctors.

Senator MONDALE. Proceed.

Dr. WHEELER. I was describing this mass of people who confronted us when we arrived there. I want to comment just a little about these people.

Most of these people live constantly at the brink of medical disaster, hoping that the symptoms they have or the pain they feel will prove transient or can somehow be survived, for they know that no help is available to them. Only two groups have any hope for relief: Those who are somewhat better off financially and those who are most critically ill and become emergencies.

Some of the people we saw were not seriously ill, or perhaps not ill at all, but none of them know, and most had never had the opportunity to find out, if they were healthy or whether tomorrow might bring disaster.

Our group was not equipped to offer very much in the way of definitive treatment for the vast amount of illness we saw. Perhaps the most constructive and most helpful acts that we performed involved the opportunities to assure some, who had never seen a physician before, that they were, indeed, well and could continue their struggle to survive without the nagging fear of physical disability or death.

For the rest, the majority of the hundreds of people we examined, it was a different, frustrating, and heartbreaking story. We saw people with most of the dreadful disorders that weaken, disable, and torture, particularly the poor.

High blood pressure, diabetes, urinary tract infections, anemia, tuberculosis, gallbladder and intestinal disorders, eye and skin diseases were frequent findings among the adults.

Almost without exception, intestinal parasites were found in the stool specimens examined. Most of the children had chronic skin infections. Chronically infected draining ears with resulting partial deafness occurred in an amazing number of the smaller children. We saw rickets, a disorder thought to be nearly abolished in this country, and every form of vitamin deficiency known to us that could be identified by clinical examination was reported.

Senator MONDALE. What do you call that disease of the ears?

Dr. WHEELER. Chronic otitis media.

Senator MONDALE. There seems to be an almost unvarying correlation between poverty and otitis media. We have seen this in Eskimos and Indian children. Apparently it is very widespread with migrant children.

Dr. WHEELER. This is an easily preventable disease. Treatment with antibiotics can prevent or cure most of the ear infections that we saw.

Senator MONDALE. But, unattended, it is not only terribly painful but it can destroy the child's capacity to hear for purposes of education, and a normal life, can it not?

Dr. WHEELER. That is correct.

Senator MONDALE. Perhaps many of these children who think they are subnormal for other reasons are really suffering from a hearing defect as a result of this otitis media. Is that the answer?

Dr. WHEELER. That is part of the answer.

Senator YARBOROUGH. Among the skin disorders, Doctor, did you see any leprosy?

Dr. WHEELER. I believe we saw one case of leprosy.

Dr. Lipscomb will give you a detailed rundown of the number of diseases and the different kinds that we saw.

There was one case of leprosy.

I doubt that any group of physicians in the past 30 years has seen, in this country, as many malnourished children assembled in one place as we saw in Hidalgo County.

There is one place I remember particularly—a labor camp in Weslaco, a small town east of McAllen.

As we walked between the rows of dwelling units, many small children played around us, running about barefoted through mud and pools of stagnant, refuse-filled water—the perfect culture for intestinal parasites, polio, and bacteria-causing infectious diarrhea which kills so many children.

We stopped and examined children at random and almost every child had some preventable physical defect. We saw tiny youngsters drinking rice water out of bottles because their mothers had no milk to give them. Chronic skin infections, both fungage and bacterial, were practically a "normal" finding.

Rickets is supposed to be a rather rare disease these days but we saw one child after another with deformed ribs and legs, thickened wrists, which are the classical landmarks of the disease. One youngster, standing apathetically near a group of playing children, had all the stigmata of advanced protein deficiency—sparse, thin, reddish hair; thin, drawn face; protuberant abdomen; and thin, wasted extremities.

We stepped into one single-room dwelling unit where parents and six children lived. Amazingly, it was spotlessly clean in spite of the fact that the nearest source of water was a block away.

On the bed lay a 3-month-old infant who weighed less than the average newborn. It was emaciated, restless, wailing, and occasionally pulling at a bottle which we soon discovered contained sour milk. There was no refrigerator in which to keep formula. The child had been ill for weeks, according to its mother, but at its last visit to the clinic, a day or two earlier, no medication had been prescribed. A very quick examination disclosed pus pouring from its right ear. We made arrangements for the child to have penicillin and individually packaged feedings of formula which the mother could not afford. I suspect we were too late, and I doubt if the child survived.

What I have just attempted to describe in Weslaco is documented on film taken by Martin Carr of NBC. When the decision was made to confine the documentary on the migrant to Florida, that film was not used and remains in the possession of NBC. It is my hope that it will be preserved and made available to the Nation, for it portrays conditions which cannot be adequately described by mere words.

Senator MONDALE. The NBC documentary was originally intended to include some of the work you were doing in Texas; is that correct?

Dr. WHEELER. That is possibly why the television filming team was there.

Senator MONDALE. But the final documentary used only film that was taken in Florida?

Dr. WHEELER. That is right.

Senator MONDALE. So that the film they shot in Texas was not seen?

Dr. WHEELER. That is right.

Senator MONDALE. I think it might be a good idea for this subcommittee to ask NBC if they could make that film available to us so that we might look at it. I think we should. I deeply regret that it hasn't been made available for general public viewing, though perhaps there were technical and production problems, or most likely, there just was not the time to show all the horrors.

Dr. WHEELER. Because of the tremendous numbers of people who sought our help in a limited time, we interviewed and examined entire families as a unit. In one tiny rural settlement, with a medical student assisting me, I spent an entire day examining one family after another. It was a shattering experience.

Their dietary histories were all the same—beans, rice, tortillas, and little else. The younger children, especially, were undersized, thin, anemic, and apathetic. The muscles of their arms were the size of lead pencils—a sign of gross protein malnutrition. Many had evidence of multiple vitamin deficiencies and almost without exception, their skins were rough, dry, inelastic, with the characteristic appearance of vitamin A deficiency.

I remember vividly the shock I received when one young boy was brought in who was well-nourished and I touched his skin—warm, soft, resilient—unlike any I had seen all day, and I called to the student with me to come and put his hand on that child in order that he might refresh his memory of what a healthy skin feels like.

The children we saw that day have no future in our society. Malnutrition since birth has already impaired them physically, mentally, and emotionally. They do not have the capacity to engage in the sustained physical or mental effort which is necessary to succeed in school, learn a trade, or assume the full responsibilities of citizenship in a complex society such as ours.

In 1967, my medical colleagues and I traveled through the Mississippi Delta and rural Alabama. There, we saw hunger and poverty and human misery to a degree that we had not dreamed possible in affluent America.

In 1970, 2½ years later, we have found in Florida and Texas, rich and fertile States, other forgotten Americans, living and working in near slavery, their children living and dying in conditions as dreadful as any we had previously encountered.

Senator MONDALE. Would it be fair to say that, despite two and a half years of national debate and discussion, despite national television documentaries that were shown depicting this unspeakable human tragedy, that for all practical purposes the lives of those you visited and saw just a few weeks ago were unimproved. And, that there was no improvement at all over what you had seen just two and a half years ago?

Dr. WHEELER. I regret very much I have to agree with you.

Senator MONDALE. The one objection I had to the NBC documentary was the comment that so much had happened, that there was so much improvement in the past years. Maybe there are places where there have been improvements. But I have been in many migrant camps, and I have talked to many a farmworker. If there has been any improvement, you need a better set of eyes than I have, and in spite of the improvement which does exist there still is such unutterable human degradation and poverty, that it is not worth commenting on.

Would you agree with that?

Dr. WHEELER. Yes, sir; without any hesitation at all.

Senator YARBOROUGH. Mr. Chairman, I think that is a sad commentary on the enforcement of Federal laws. Under the previous chairman of this subcommittee, Senator Harrison Williams, we enacted the first migrant labor health laws. The Congress appropriated millions of dollars to see that something was done.

In our visit down there last year, we found a doctor, a retired Army medical doctor, in charge, and just a few people, one registered nurse, for a vast area. But about all they were doing was keeping records. They were not giving treatment to the people or examining patients.

They were drawing salaries, but from what we could see very little was being done with the money we appropriated.

Senator MONDALE. I can remember going in the slums and the migrant health director saying, "Gosh, it is interesting."

I said, what do you mean "it is interesting?"

He said, "These people living like pigs down there."

He had never been there before. It was his job; he was supposed to be in charge of their health. Yet, he had not even been there.

Senator YARBOROUGH. The reason the Army doctor took it is because they could not get a medical doctor to do it. He just sat at the county seat and drew a salary and had responsibility over about four counties.

Doctor, there is one thing you said in here, in this row of one-room installations, putting a whole family in one room, 8 by 14 feet. You said it suggested slave quarters of earlier days.

I have been around on tours and looked at some of these old slave quarters on plantations. Most of those I ever saw had a separate cabin for each slave family. At least, the ones I have seen that still survive. The slave quarters had more space than this for the slaves.

Have you seen that type where they had a separate cabin?

Dr. WHEELER. Yes; I have pictures of them.

Senator YARBOROUGH. They had more space than some of these migrant workers have now.

Senator MONDALE. That is the difference between owning and renting slaves. The owner had to take care of them; he had an equity in them.

Senator YARBOROUGH. He had a great investment in them.

Senator MONDALE. That is right.

Dr. WHEELER. It is not likely that we saw more malnutrition or more human misery than we had seen in the Delta. Perhaps, in the time that we were there, we did not experience as much overt hostility expressed by the white community as we had sensed in Mississippi and Alabama.

In the Delta, mechanization of the huge farm industries had rendered thousands of people useless to the economy, and they were left to die or to survive as best they could. In some instances, it seemed clear that there was an unspoken conspiracy to solve the problem by making life so intolerable that people were forced to flee the land and the State in which they could no longer earn a living. No longer needed and unable to secure help from the white community, the black Mississippian at least had the freedom to leave, if he were able, and to seek a better life elsewhere.

In Florida and Texas, the farm worker remains a valuable asset to the owners and operators of the huge farms which produce food and fruit for the Nation. Without them, corn and tomatoes would rot in the fields, and oranges and grapefruit would shrivel on the trees. There is no way that these farms can be operated without the migrant work force which moves about the area, harvesting the beans and squash this week, moving on to gather the avocadoes another week, in another county. Mechanization has not yet devised a way to replace them.

What is different in Florida and Texas from the rest of the rural South is the deliberate, cruelly contrived, and highly effective system which has been devised to extract the maximum work and productivity from other human beings for the cheapest possible price.

Every effort is directed toward isolating the farmworker from the rest of society, maintaining him at the lowest level of subsistence which he will tolerate—then making certain that he has no means of escape from a system that holds him in virtual peonage. And, to that the grower has the full cooperation of the Federal Government, the State, and the local community.

Senator YARBOROUGH. Doctor, let me say a word there.

You know in 1966, through the Labor and Public Welfare Committee, we brought the minimum wage law for the first time in this Nation to farmworkers.

Now, Franklin D. Roosevelt had a national minimum wage law in 1933 to protect the workers in the factories and in the fields. But, for a long period of time, people who advocated such laws were never able to pass the laws through the Congress to protect the workers in the fields. We were able to pass that law in 1966 and brought the minimum up to $1 the first year, $1.15, $1.30 an hour. It is a minimum, not a maximum. A very poor wage but a minimum wage, where before the wages paid had been about half that.

I noted earlier in your statement something which indicated that the problem was that there has been no enforcement of that law and failure to enforce it or failure to get the benefits of it to the worker. I think this committee ought to explore that, whether the law we have passed has been implemented.

Here the Congress has shown some concern by passing laws to put money into States to educate the migrant workers and put a minimum wage on their labor. Over the course of the past 10 years, these laws have been passed. The problem is, as we go out to the "colonias," as those settlements are called, that the English-speaking people seldom see them, and many of the more affluent Mexican-Americans never see them.

The problem has been to get these laws to the people to make them operative, but the Federal Government has in the past 10 years been working, and trying to do something.

Senator MONDALE. It is my impression that minimum wage laws are are being widely avoided and violated. And, the employer has to be fairly large in the first place.

Senator YARBOROUGH. Seven or more workers. All the big farms have more than that; the farms in Hidalgo County who hire 100 at a time.

Dr. WHEELER. One way to go around it is by so-called piece rates for piecework. They pay the worker on the basis of his production. They pay by the pound or by the bushel or by the basketload for what he picks.

Working on a piecework basis and being paid that way, it is my understanding that very few of these workers are able to earn what would amount to the full minimum wage for the number of hours worked.

At this point in my report, in order that what I say next will not be misinterpreted, I would like to express my high regard and respect for the members of the Subcommittee on Migratory Labor and my admiration for the hard work, the commitment, and the efforts of all of you in your attempt to better the life of the migrant. No one has done more.

At the same time, I have questions which I feel must be raised or I will not have carried out my responsibility to you or to the people about whom we are both concerned.

These questions relate to the reasons for this hearing and the many hearings which have preceded it on the same and related subjects.

You are perhaps even more aware than I of the volumes of information and the days of testimony which are already available to you and to the Congress, documenting the fact of children in our midst who are stunted physically, dulled mentally, and warped emotionally—children who are deprived of all opportunity to become productive citizens—children who will grow up to become wards of society or worse—perhaps hostile, alienated, and destructive.

I have here a copy of a report of the President' Commission on Migratory Labor, written and submitted to President Truman in 1951. Even a cursory examination of its pages will reveal that the plight of the migrant has not changed significantly during the intervening 19 years.

What does it take to make us care about our children?

The picture we saw is one of a society thriving on greed, cruelty, alienation, and fear—a society which either never had or has completely abandoned the concerns, the ethics, the ideals which make dignity and freedom possible.

What has been done to convince the Congress of the United States, the most powerful group of men in the world, that the time has come to put aside its greed, its prejudice, its concern for personal power and prestige—and to be concerned for the kind of society in which our children must live together?

You, and only you, can change all this. How is it possible to justify the endless words and the devious political maneuvers which have delayed and withheld meaningful aid to children who don't have enough to eat, children whose parents have no jobs and no money for food or medical care?

How can the Congress and our Nation's leadership pretend to be related in any sane way to the world around them when they spend their time and the Nation's wealth building roads and guns and planes and elaborate government buildings while families live 10 or 12 in one room without water, heat, ventilation, or even a place to wash their hands?

And children die—even worse, most of them live, numbed by hunger and sickness, motivated only by an instinct for survival, crowded into the ghettos of horror which abound in our country which produce desperation and loss of faith in our system. Our answer seems to be more police, more guns, and more punitive laws whenever they protest.

We came away from Florida and Texas with tremendous admiration for the leaders of the people we met. These men, often at great risk, were working to give their people hope and leadership which would dispel their apathy and despair.

In many respects, these people were stronger than most of us. They endure what seemed to me to be the unendurable, with patience, humor, and understanding. Remarkable in view of the misery which surrounds them and the powerlessness they experience. They have not given up the hope that we, who can help, will someday raise our voices and say that there are some things in our country which are intolerable, that these things can be changed, and must be changed. Our time is running out.

Thank you, Mr. Chairman.

[Applause.]

Senator MONDALE. Thank you, Dr. Wheeler, for a most moving and historic statement of the current tragedy and disgrace of the lives of the migrants and their families.

You make a challenge, a challenge to us, in your conclusion that I can't answer.

We have spent days and years in this committee listening to the evidence of human tragedy, tragedy that should never occur anywhere in the world, let alone in the wealthiest society on earth. We pass laws that provide only minimal coverage and minimal benefits, but even they seem to be ignored. Bills pass the committee or the Senate and never become law.

For example, a year and a half ago we traveled to a Nutrition and Human Needs Committee hearing in Collier County and elsewhere. It was readily apparent that the only kind of food program that would work is one in which the Federal Government had the ultimate responsibility for finding the hungry and feeding the poor. If we depended on the local power structure, you could be absolutely certain that the poor were not even going to be identified, let alone going to receive food assistance.

I led the fight in the Senate to help overcome that problem. We passed an amendment which includes that Federal responsibility in the so-called McGovern-Javits bill. But that bill has languished in the House Agriculture Committee since that time. I regret that the administration is not supporting us in that record. But without that responsibility, I don't think we are going to meet the needs of these human beings. It just won't happen.

After we came back from our hearings in McAllen, Tex., I was so outraged that we tacked an amendment on the Migrant Health Act requiring the establishment of advisory boards composed of the target population so that the migrants and their families would have to be consulted in migrant health programs.

Now, I do not know for sure, but I have been told that not a single such council has been established. It is just as though there is little difference between passing a law and sending a letter, our legislation is just sort of advisory these days. It is something that the administration will think about and do, or not do, depending on what they want to do.

The other day I led the fight for unemployment compensation for the migrants, at least coverage for those working for the very largest farmers. We have passed that in the Senate. It was not in the House bill. It was the first thing dropped in the Conference Committee. Even the Washington Post, which I regard as one of the most liberal decent journals of our country, wrote a public editorial saying, let us not jeopardize our program by fighting over the migrants. Let us drop that thing and go on to fight another day.

If there is anything expendable, if there is any human being that has been relegated to the status of worthless trash in the U.S. society, it is the migrant. Yet, they work harder than practically any other working man in our society. They crawl on their bellies, they stoop, they climb, all over this land just trying to find enough to live on.

I accept the challenge; I accept the criticism; but the truth of it is that the migrant is without a friend powerful enough to make any substantial difference in his life, and that has been true for 50 years.

(A history of the Unemployment Insurance legislation and related material referred to follows:)

[Excerpts from the Congressional Record, Apr. 7, 1970]

EMPLOYMENT SECURITY AMENDMENTS OF 1970, CALENDAR NO. 755, H.R. 14705

Mr. LONG. Mr. President, first, I should like to ask that the distinguished Senator from Minnesota (Mr. McCarthy) be notified that the bill is now before the Senate. I would also like to ask that the distinguished Senator from Connecticut (Mr. Ribicoff) be notified that the bill is now before the Senate, because those two Senators might be interested in offering amendments to the bill. Any other Senators might be interested in offering amendments to the bill. Any other Senator who may have a particular interest in it should also be notified.

Mr. President, this is a rather significant bill and I hope that if Senators care to offer amendments they will do so tonight, so that we may proceed to a vote on them and move expeditiously with this measure.

The bill before us today, if enacted, will represent the most significant legislation to amend the unemployment compensation program since its enactment in 1935 as part of the Social Security Act. Senators will recall that similar legislation was approved by both House and Senate in 1966, but was not enacted into law because of the inability of both houses to resolve their differences in conference.

The bill before us today would extend the coverage of the unemployment compensation program to more than 4 million additional jobs; establish a permanent program of extended benefits for people who exhaust their regular State benefits during periods of high unemployment; improve the financing of the program; and make other changes to strengthen the Federal-State unemployment compensation system.

The bill is a good one—it does not go as far as some persons would like, and it goes further than others would like, but on the whole it represents a reasonable compromise supported by virtually every witness testifying before the Committee on Finance.

The bill was given careful and thorough consideration by the committee. Three days of hearings were held in March, involving 368 pages of testimony, in addition to the extensive work done in connection with unemployment compensation in 1966.

Now, Mr. President, I would like to highlight some of the major features of the committee bill.

COVERAGE

About 58 million jobs today are protected by our unemployment compensation system. About one-half of the 16.6 million jobs not now covered are in State and local governments. Most of these jobs would not be affected by the committee bill. The bill would, however, extend coverage to up to 4.4 million of the 16.6 million jobs not covered under present law. * * *

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The committee bill, like the House bill, extends coverage to 190,000 agricultural processing workers. In addition, however, the committee bill extends coverage for the first time to employees of large farms. Under the committee amendment, farm employers who have eight or more employees in each of 26 different weeks during the year would be brought under the program and their employees would become eligible for unemployment compensation benefits. The committee amendment is intended to extend coverage to those large farms which most nearly present a stable year-round employment situation comparable to that of business and industry. The provision would not affect the typical family farm or a farm employing more than eight workers for only a brief harvesting season.

The committee felt it desirable to limit the newly provided coverage so that we may gain administrative and cost experience before considering extension of coverage. Thus the committee bill would exclude the employees of a crew leader from coverage under Federal law, even if the crew leader had eight or more employees in at least 26 weeks. The committee wished to limit the provision to those agricultural employees whose employment experience most closely resembles that of industrial employees; coverage of migratory labor might well present difficult administrative problems, and it might prove costly.

Even though the committee bill would affect only 2 percent of farm employers in the Nation, it would extend coverage to almost one-fifth of agricultural employees.

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Mr. Mondale obtained the floor.

Mr. Mansfield. Mr. President, will the Senator yield?

Mr. Mondale. I yield.

Mr. Mansfield. Mr. President, for the information of the Senate, there is going to be another rollcall vote very shortly. There may very well be a rollcall vote on final passage. I urge all Senators to stay close to the chamber.

Mr. Mondale. Mr. President, I send to the desk an amendment and ask unanimous consent that its reading be dispensed with and that it be printed in the Record.

The Presiding Officer. Without objection, it is so ordered.

The amendment is as follows:

"Beginning on page 4, line 24, strike out '(other than a crew leader as defined in section 3121(o)'.

"On page 5, strike out lines 15 through 18.

"On page 5, line 19, strike out '(d)' and insert in lieu thereof '(c)'.

"On page 5, line 22, strike out 'amendments' and insert in lieu thereof 'amendment'.

"On page 5, line 23, strike out 'and subsection (c)'."

Mr. Mondale. Mr. President, I ask for the yeas and nays.

The yeas and nays were ordered.

Mr. Mondale. Mr. President, I yield to the Senator from Florida.

Mr. Holland. Mr. President, I understand that the distinguished Senator from Minnesota has yielded to me to present an amendment, which I send forward at this time, and ask unanimous consent that his amendment be temporarily laid aside.

The Presiding Officer. Without objection, it is so ordered.

Mr. Holland. Mr. President, I ask particularly the attention of the Senator from Louisiana and the Senator from Delaware, because I have discussed this matter with them.

The Presiding Officer. The amendment offered by the Senator from Florida will be stated.

The bill clerk read the amendment, as follows:

"On page 4, line 24, immediately after '(k)' insert: 'unless performed by an individual other than an alien admitted to the United States to perform agricultural labor pursuant to sections 214(c) and 101(a)(15)(11) of the Immigration and Nationality Act, and'."

Mr. Holland. Mr. President, the act referred to in the amendment is the act under which the Secretary of Labor can allow agricultural workers to be brought into the United States for temporary harvesting purposes.

The definition of "agricultural labor" in the bill is so broad as to apparently not exempt them, though they are aliens, and though they, at least in my State, would not be qualified to receive compensation benefits.

I understand from the Senators from Louisiana and Delaware that they agree there is no intent to include that type of labor within the purview of this act, and I have offered this amendment to make it clear that this type of labor would be excluded.

Mr. Long. Mr. President, will the Senator yield?

Mr. Holland. I will, but let me make one more statement. This matter is important in my State, because, under the Secretary of Labor's orders, we have been allowing the import of about 9,000 workmen from the British West Indies to cut sugarcane every year. Americans will not do that kind of labor, on their knees, in the muck, with hand machetes. It would amount to a very considerable amount collected by way of taxes, but without workers being qualified to collect compensation payments.

I hope the amendment will be accepted.

Mr. LONG. Mr. President, this is a problem that the committee did not consider. The Senator from Florida directed the matter to our attention. We have looked into it. In my judgment and in the judgment of the senior Senator from Delaware (Mr. Williams), the amendment of the Senator from Florida is eminently justified. For the most part, these people would not be eligible to receive benefits. It serves no purpose to put a tax on their employer if no benefit is to flow from it.

On that basis, I would be willing to agree to the amendment, take it to conference, and see that it receives the consideration to which it is entitled.

I regret that we did not know about this matter when we considered the bill in executive session, but perhaps that is one of the losses we sustained when the Senator's former colleague, Senator Smathers, who was one of the ranking members of the Committee on Finance, decided to retire from the Senate, and thereafter there was no Senator from Florida on that panel.

With that knowledge, we will be willing to make the adjustment.

Mr. WILLIAMS of Delaware. Mr. President, will the Senator yield?

Mr. HOLLAND. I yield.

Mr. WILLIAMS of Delaware. Mr President, I concur in the remarks of the chairman of the committee. Had this matter been called to the attention of our committee, we would have accepted it. I am perfectly willing to accept the amendment.

Mr. HOLLAND. I thank my distinguished friends. I ask for a vote on the amendment.

The PRESIDING OFFICER (Mr. Bellmon). The question is on agreeing to the amendment of the Senator from Florida.

The amendment was agreed to.

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EMPLOYMENT SECURITY AMENDMENTS OF 1970

The Senate continued with the consideration of the bill (H.R. 14705) to extend and improve the Federal-State unemployment program.

Mr. MONDALE. Mr. President, the amendment I have offered is cosponsored by the Senators from California (Mr. Murphy and Mr. Cranston), the Senator from Oklahoma (Mr. Harris), the Senator from New York (Mr. Javits), the chairman of the Committee on Labor and Public Welfare (Mr. Yarborough), and the Senator from Massachusetts (Mr. Kennedy). It is designed to guarantee that migratory farm labor as well as other types of farm laborers will be included within the coverage of unemployment compensation.

I submitted a statement for the consideration of the Finance Committee urging inclusion of farmworkers under unemployment compensation program. I ask unanimous consent that it be inserted in the Record at this point in my remarks.

There being no objection, the statement was ordered to be printed in the record, as follows:

"STATEMENT OF SENATOR WALTER F. MONDALE

"Mr. Chairman and members of the Committee, I thank you for the opportunity to present testimony on H.R. 14705, the Employment Security Amendments of 1969. I urge that this bill be amended by extending coverage to farmworkers.

"Farmworkers are now excluded from our Nation's unemployment compensation scheme. They are similarly excluded, or at best only minimally included, in practically every major piece of social and worker benefit legislation that we have ever enacted into law. Congress created, and has perpetuated, a system that treats farmworkers as second class citizens with respect to legal protections most Americans take for granted:

"Sometime in the second half of 1970, a State employment security agency will pay a worker who has become unemployed the 50 billionth dollar in unemployment insurance benefits which have been paid since the unemployment insurance payments began in 1936. Farmworkers have not received a single penny of the $50 billion.

"In 1969 alone, more than 4 million persons received over 2 billion dollars in unemployment insurance payments, but no farmworkers received benefits in 1969.

"Workers in some 58 million jobs, 77 percent of all jobs in the United States, are protected by an unemployment insurance program against total loss of wages during spells of unemployment. H.R. 14705 would cover 4.5 million additional jobs, bringing the total coverage to 84 percent of all jobs. Another 10 percent of all jobs are uncovered State and local government jobs. Every major job classification in private industry is covered by unemployment insurance, except farmwork. But, farmworkers remain excluded.

"Regrettably, the House Bill before you perpetuates the exclusion of 1.3 million jobs in agriculture. Clearly, the exclusion of certain workers from a program in which the preponderance of their fellow workers share, is inequitable, discriminatory, unjustified, and a contradiction of this Nation's commitment to justice and dignity.

"There is presently no rational basis for the continued exclusion of farmworkers. The history of administration of this universal social insurance program demonstrates that previously raised objections have no merit. At one time this admitted inequity was justified on the theory that farm employers would have difficulty in maintaining records and filing reports. But this has evaporated in the face of reporting requirements pursuant to Social Security legislation and the Fair Labor Standards Act. Where coverage under that legislation exists, administrative burdens have not been cited as proventing adequate administration of the law.

"Also, some contended that exhorbitant costs made coverage impossible, and at best justified more studies and research. We now have the studies and research into the cost of farmworker coverage to farm employers and the State unemployment insurance funds. As early as ten years ago research was completed showing costs which at the highest are not particularly greater than in other industries, and some of the studies indicated costs that are far less than those experienced by many other industries. In fact, it has been argued, coverage under this act may save the farmer money by increasing the stability of the work force and reducing the costs of recruitment and turnover.

"The purpose of unemployment compensation is to provide an orderly method

"The purpose of unemployment compensation is to provide an orderly method of offsetting the effects of unemployment to the individual and the community. It enables nondeferrable living expenses to be met without having the recipient rely on meager savings or community welfare or charity; consumer purchasing power is preserved. Since benefits are paid by State unemployment agencies, the unemployment insurance system keeps the unemployed in touch with job opportunities.

"The migrant agricultural worker clearly needs the benefit of a program directed toward these objectives. Most often the migrant worker is unemployed through no fault of his own; weather, crop conditions, oversupply of labor created through faulty recruiting and market information difficulties, and crop mechanization that creates geographical gaps in work opportunities.

"My proposal is not a partisan effort. Members of both parties have supported coverage for farmworkers. President Nixon urged limited farmworker coverage in his Message to the Congress of July 8, 1969, Senator George Murphy, a member of the Migratory Labor Subcommittee, has recommended coverage. The ranking Republican and Democrat members of the House Ways and Means Committee argued, in vain, for coverage in Committee sessions. Governor Ronald Reagan of California has appealed to the Congress to extend unemployment insurance coverage to full-time farmworkers, and Secretary of Labor Shultz spoke strongly for large farm employer coverage in his testimony before you earlier this month. I hope this progressive, bipartisan commitment to justice for farmworkers will be extended to other fields.

"Finally, Mr. Chairman, and members of this distinguished Committee, I say 'Let's do it'. Let's not leave ourselves in the irrational position of having again to say to the people that work so hard to harvest our crops, that 'we are going to perpetuate your second class citizenship'. Let's not even put ourselves in a position of going only part way by extending coverage to only a few farmworkers.

"Let's not perpetuate the second class treatment of our fellow Americans. Our Nation is rich and bountiful in promise and potential. No great sacrifice is involved in granting full unemployment insurance coverage to farmworkers. Let's do it."

* * * * * * *

Mr. MONDALE. The committee version of the pending bill extends unemployment insurance protection to farmworkers where an employer has eight or more workers for 26 weeks. However, the bill also exempts workers who are working under a crew leader by excluding crew leaders from the newly recommended definition of farm employers. Many migratory farm laborers work under a crew leader. Moreover, in my judgment, if the committee bill language is accepted, those workers who do not now have crew leaders will either be required to quickly get them, or will be assigned crew leaders. This may serve to exempt a substantial segment of farmworkers from the unemployment compensation coverage recommended by the committee in order that farm employers could avoid the tax required to fund the unemployment compensation program.

This amendment that I now propose is a modest and conservative one. It does not extend the coverage for migratory labor beyond the limits otherwise recommended by the committee for farm labor. This bill is a modest proposal that will cover roughly only about 20 percent of farm labor, and only 2 percent of this Nation's farms, which are the larger concerns. By extending coverage to farmworkers, the bill is a first step to extend unemployment compensation to the poorest segment of the American working force; namely, farmworkers and migratory workers.

Mr. President, this amendment enjoys bipartisan support. It is supported by the Secretary of Labor. Its provisions have even been supported by Governor Reagan of California and others who, I think quite rightly, join in the basic assumption that of all workers, the migrants are the most poorly treated in American life.

Ten years ago, there was a moving documentary film called "Harvest of Shame."

Mr. MURPHY. Mr. President, will the Senator yield?

Mr. MONDALE. I am happy to yield to the Senator from California.

Mr. MURPHY. I joined with the Senator from Minnesota as a cosponsor of this amendment. Unfortunately, in many States, migratory labor is badly treated. I point out that that is not so in the State of California. I would also point out to my distinguished colleague that some of the documentary movies which have been made leave a great deal to be desired in treatment of the facts and the truth of the matter.

However, in dealing with this particular segment of labor, there is no question in my mind, nor in Governor Reagan's mind, that these people should be included, and I am pleased to join with my distinguished colleague from Minnesota in this amendment, which I think at long last will help this particular group which are so important to the agriculture business, not only in California but in 28 other States in the Union.

Under the definition and under the language of the amendment, as my colleague has pointed out, it will affect only about 20 percent of the some 230,000 of these migratory laborers who are so important. I enthusiastically endorse the amendment, and urge my colleagues to heed the voice of one who has been studying this problem for many years—about 30 years—and says that this is a good amendment, and a step in the right direction. It extends aid to people who have needed it for a long time, and who I am glad to say receive it under the State provisions of the State of California.

I thank my distinguished colleague.

Mr. MONDALE. Mr. President, I am ready to go to a vote on this amendment. But first, I am happy to yield to my senior colleague from Minnesota.

Mr. MCCARTHY. Mr. President, I think it is important to note that the bill without this amendment leaves the way open for genuine abuse, even with reference to those agricultural workers we are trying to cover; simply by the device of appointing a crew leader, the whole thrust of the legislation, which would extend coverage at least in a limited way to agricultural workers might be entirely frustrated.

Mr. MONDALE. The Senator is absolutely correct. As a matter of fact, this legislation appears to provide a financial incentive to the farmer who might require crew leaders for all farmworkers who do not now have them. Under the committee bill, there is no additional expense connected with the compensation of employees of a crew leader. The bill, without my amendment, simply avoids any coverage whatsoever for employees of crew leaders, and by a ruse farm employers might avoid all farmworker coverage.

Mr. McCarthy. We might even exclude some already covered, and some we seek to cover in this legislation.

I think if we were to do that, by exempting those with crew leaders, it would set a very bad precedent that farmworkers and those who live by the land are somehow second-class citizens, and should not be subject to coverage or protection as far as the operation of the law is concerned.

I support the amendment of my colleague from Minnesota.

Mr. Mondale. I thank my senior colleague for his support. Perhaps more than any other Member of the Senate, he has specialized in efforts to reform, modernize, and make more meaningful the unemployment compensation laws of this country.

The Presiding Officer. The question is on agreeing to the amendment of the Senator from Minnesota.

Mr. Williams of Delaware. Mr. President, the committee bill would exclude the employees of a crew leader from coverage under Federal law, even if the crew leader had eight or more employees in at least 26 weeks. The committee feels that administrative and cost experience should be gained from the coverage of agricultural business before coverage of additional agricultural employees is considered. Coverage of migratory labor might present administrative and cost problems which it would be preferable to avoid in this intial extension of coverage to agricultural employment.

The committee bill already extends the coverage to 233,000 agricultural workers. The committee felt in the case of migratory labor that we were not sure just how it would work. For example, these migratory workers would be working for a few months, say, in Florida and a few months later they may be in Georgia or North Carolina, and later would be working up the coast. They would work in six or eight States. They might pay taxes in those States, but when the workers were to draw benefits, from which State would they get the benefits? This is one reason why we felt that the committee and the administration needed to study the problem a little more before we could prefect legislation, and for that reason we rejected it at this time, with the understanding that the administration was going to study this matter further and try to come back with a solution as to how it actually could be applied. Frankly, the committee does not understand how it could be applied at the present.

Mr. Curtis. Mr. President, will the Senator yield?

Mr. Williams of Delaware. I yield.

Mr. Curtis. I think the people who are interested in migratory labor should be commended, but we are faced with some real problems here. Our unemployment systems are State systems.

The last rollcall vote reaffirmed, as the distinguished Senator from Delaware has pointed out, that part of the services are performed in one State, then they go to another State and gather fruit or vegatables or perform whatever labor is necessary, and then on to the third State. Who carries the cost of unemployment compensation?

Many problems need to be worked out—administrative problems—and it requires careful study and should be presented to a committee so that they could call in some witnesses and make sure that what is proposed is the most practical way to do it.

While the amendment is well intentioned, I feel that it should not be adopted because of the administrative problems.

Mr. Williams of Delaware. I concur in what the Senator from Nebraska has said.

I do not argue on this amendment on its merits. A good argument could be made as to the merits. I do not question for a moment the sincerity of those who sponsor the amendment, and they certainly have a problem. Frankly, it is a problem to which our committe did not have a solution. We do not have it now, and we do not know how we can make it work. That is why I say we have to oppose taking this step at this time.

Mr. Long. Mr. President, will the Senator yield?

Mr. Williams of Delaware. I yield.

Mr. Long. As the Senator knows, in this bill we make the first effort to extend coverage to agricultural labor. We extend coverage in this bill to 2 percent of agricultural employers, but we reach almost one-fifth of agricultural labor. In doing so, we proceed with those in the agricultural business whose activities most closely approximate the way a business is conducted. We cover the larger agricultural operations, and we think that this coverage is feasible and administratively possible. We will gain a great deal of experience with that, to see how further we can extend coverage to what extent we should extend it to others.

We say in the committee bill that where one has eight employees and they work for him as much as 26 weeks, those people are covered. We did not try to cover migratory workers. We thought it would be very difficult and complicated and would create all sorts of administrative difficulties.

This amendment would create much more complexity and much more difficulty of administration. There are other ways we could broaden coverage of agricultural labor under this bill, beyond that which is covered under the committee bill. For example, it would be much easier to reduce the number of employees from eight to six, or to reduce the number of weeks from 26 to 20, and cover many more people.

These people migrate from one State to another. In some cases they might be in a State for a number of weeks, and if you try to collect the tax in one State so that benefits can be paid, you would have to trace the person from State to State to determine ones' entitlement. The crew leaders, after all, are migrants themselves, moving from place to place. They are poorly qualified to keep records on those who work under their supervision.

For these reasons, we do not think that this is where we should start with covering agricultural labor. In this bill we make a reasonable start.

The House did not cover any agricultural labor. They just left them out. We will be doing well in conference to persuade the House to accept what the committee has agreed to, without trying to get the House conferees to go along with something that presents serious administrative problems.

It seems to me that we have made the right start in the right area with agricultural labor, and that the committee bill would extend coverage where it is most feasible and can be best administered. Then, having had some experience, we can consider this problem later. Otherwise, we may find that while we have covered 30,000 migrant laborers, because of the administrative hurdles involved, we have put a tax on their employment without them being able to benefit.

Mr. WILLIAMS of Delaware. That is what we were afraid of in committee. Nothing in the House bill dealt with agricultural labor. The committee bill extends it to 233,000 agricultural workers. We were fearful that if we included migratory labor, in a measure which we did not know how to administer, and we could not suggest how it could be administered—the administration was unable to tell us how it could be administered—we would lose the whole package.

That is the reason why we were afraid to put this in at this time, and why we are afraid to accept it now.

Mr. LONG. The Senator has made a good point, and it should be kept in mind: This is virtually the same bill that died in conference 4 years ago. The Senate put a lot of ambitious amendments in that bill in the 89th Congress, and the Senate was determined in that matter, but the House simply stood fast and nothing happened.

I would hope that we would take pride in sending to conference a bill that would extend unemployment compensation insurance coverage to up to 4.4 million additional workers, and not jeopardize the bill with this amendment, which we believe would present an enormous administrative problem in extending coverage to some 40,000 workers. In my judgment, we probably could not work it out in conference, anyway.

I hope we would get on with this bill and extend coverage to the 4.4 million people who have been denied it altogether too long, and not tie up this bill in a deadlock between the House and the Senate in conference.

Mr. WILLIAMS of Delaware. I support the argument of the chairman. I hope that this amendment will be withdrawn, with the promise on the part of the chairman and myself and other members of the committee that we are sympathetic to the problem and that we would give it careful study and try to see if we could work out a solution. Perhaps it could be done and incorporated at a later date.

As I said before, frankly, in committee we objected to this not on its merits, but just on the basis that we did not know how it would work. These migrant workers will be working in four or five States during the year, and if their employers contribute to the unemployment fund of four or five States, which State is going to pay the unemployment compensation? And if they have different rates of unemployment compensation in the different States, under what basis will it be paid?

It is a mathematical problem which we did not know how to solve, and that is why we hope the amendment will not be accepted at this time.

Mr. Long. I voted for the McCarthy amendment, but the Senate voted that down by a 2-to-1 margin. If we had Federal standards, perhaps the States would better be able to administer what the Senator seeks to do with this amendment about crew leaders and their labor. Without any type of Federal standards, there is a lack of uniformity which can present a virtual administrative impossibility, in the mind of this Senator.

Mr. Allott. Mr. President, I should like to ask the Senator from Minnesota a couple of questions about his amendment since I have not had a previous chance to study it. I feel that it might be helpful to clarify the Record on one or two points.

First, is the bill now before the Senate presently applicable to the Territories and if so, which ones?

Mr. Mondale. I would ask the chairman of the Finance Committee, the Senator from Louisiana, to respond to that question. I would say it is not applicable.

Mr. Allott. Let me say that I have just inquired privately of the Senator from Louisiana, chairman of the committee, and he says that it is not applicable to any of the Territories. I am sympathetic to the concerns of the distinguished Senators from California and Minnesota, although I shall not support it for the reasons which the chairman and the ranking member of the committee have stated.

Mr. President, the reason for my question about the applicability of the Territories is because of the alien labor situation in the Virgin Islands. There are approximately 15,000 noncitizen workers employed in the Virgin Islands. Those of us on the Interior and Insular Affairs Committee have tried to find some remedies to this situation. The main support for services now in the Virgin Islands, however, comes out mostly from the British Virgin Islands and other British islands around there, and from some of the French islands.

The Senator can see that I would be very much concerned about the amendment if it did apply to those aliens and noncitizens where employers would be paying the employment tax for those noncitizens.

Since I have been assured that this does not apply to the Virgin Islands, nor to the other Territories in which the situation prevails, the problem does not apply. However, I wanted to be sure, in case the amendment should pass, that it did not apply to our Territories or to the aliens who work in them.

Mr. Long. I might say to the Senator that I believe the amendment offered by the distinguished senior Senator from Florida and accepted by the Senate just before the Senator from Colorado entered the Chamber should completely clarify the matter. It excludes this sort of alien labor from the coverage provided by the committee bill.

The Presiding Officer (Mr. Gravel). The question is on agreeing to the amendment of the Senator from Minnesota.

On this question, the yeas and nays have been ordered, and the clerk will call the roll.

The assistant legislative clerk called the roll.

Mr. Kennedy. I announce that the Senator from New Mexico (Mr. Anderson), the Senator from North Dakota (Mr. Burdick), the Senator from Iowa (Mr. Hughes), the Senator from Washington (Mr. Magnuson), the Senator from Connecticut (Mr. Ribicoff), the Senator from Georgia (Mr. Russell), the Senator from New Jersey (Mr. Williams), the Senator from Ohio (Mr. Young), the Senator from Indiana (Mr. Bayh), the Senator from Oklahoma (Mr. Harris), the Senator from Mississippi (Mr. Stennis), and the Senator from Maryland (Mr. Tydings) are necessarily absent.

I further announce that the Senator from Tennessee (Mr. Gore), the Senator from Rhode Island (Mr. Pell) and the Senator from Georgia (Mr. Talmadge) are absent on official business.

I further announce that, if present and voting, the Senator from Oklahoma (Mr. Harris) and the Senator from Connecticut (Mr. Ribicoff) would vote "yea."

Mr. Griffin. I announce that the Senator from Utah (Mr. Bennett) is absent on official business as observer at the meeting of the Asian Development Bank in Korea.

The Senators from New York (Mr. Goodell and Mr. Javits), the Senator from Idaho (Mr. Jordan) and the Senator from Illinois (Mr. Percy) are necessarily absent.

The Senator from South Dakota (Mr. Mundt) is absent because of illness.

The Senator from Ohio (Mr. Saxbe) is detained on official business.

If present and voting, the Senator from South Dakota (Mr. Mundt) would vote "nay."

On this vote, the Senator from Illinois (Mr. Percy) is paired with the Senator from Utah (Mr. Bennett). If present and voting, the Senator from Illinois would vote "yea" and the Senator from Utah would vote "nay."

On this vote, the Senator from New York (Mr. Javits) is paired with the Senator from Idaho (Mr. Jordan). If present and voting, the Senator from New York would vote "yea" and the Senator from Idaho would vote "nay."

On this vote, the Senator from New York (Mr. Goodell) is paired with the Senator from South Dakota (Mr. Mundt). If present and voting, the Senator from New York would vote "yea" and the Senator from South Dakota would vote "nay."

The result was announced—yeas 42, nays 36, as follows:

[No. 120 Leg.]

YEAS—42

Aiken
Baker
Brooke
Byrd, W. Va.
Case
Church
Cook
Cooper
Cranston
Dodd
Dole
Eagleton
Gravel
Griffin
Hart
Hartke
Hatfield
Hollings
Inouye
Jackson
Kennedy
Mansfield
McCarthy
McGee
McGovern
McIntyre
Metcalf
Mondale
Montoya
Moss
Murphy
Muskie
Nelson
Pastore
Pearson
Prouty
Proxmire
Randolph
Schweiker
Stevens
Symington
Yarborough

NAYS—36

Allen
Allott
Bellmon
Bible
Boggs
Byrd, Va.
Cannon
Cotton
Curtis
Dominick
Eastland
Ellender
Ervin
Fannin
Fong
Fulbright
Goldwater
Gurney
Hansen
Holland
Hruska
Jordan, N.C.
Long
Mathias
McClellan
Miller
Packwood
Scott
Smith, Maine
Smith, Ill.
Sparkman
Spong
Thurmond
Tower
Williams, Del.
Young, N. Dak.

NOT VOTING—22

Anderson
Bayh
Bennett
Burdick
Goodell
Gore
Harris
Hughes
Javits
Jordan, Idaho
Magnuson
Mundt
Pell
Percy
Ribicoff
Russell
Saxbe
Stennis
Talmadge
Tydings
Williams, N.J.
Young, Ohio

So Mr. Mondale's amendment was agreed to.

[From the Packer, May 9, 1970]

WASHINGTON COMMENT

(By Ken Scheibel)

Once in a blue moon one man single-handedly stops legislation dead in its tracks in Congress.

That was the case last week with unemployment insurance for agricultural workers, which Congress was on the verge of approving.

The bill had been turned down by the House but was approved by the Senate. It was a waiting further action in a Senate-House conference committee.

But that was before Richard V. Thornton, executive vice president of the National Council of Agricultural Employers, got his message to lawmakers.

NCAE opposed the legislation but had agreed to go along if Congress wanted things that way. But Thornton pointed out that more people ought to do more thinking about the issue.

A few hours before the group of five senators and five representatives were to meet to stamp a final okay on the measure, Thornton went to work in a flurry of activity.

He had learned that the Department of Labor was financing a research program to be conducted this summer by 12 land grant colleges in the Northeast to determine the feasibility of unemployment insurance for agricultural workers.

"It made no sense for the Department of Labor to request this bill before they completed their study this summer," Thornton said. The lawmakers got the point—and knocked the provision out of the bill.

So, for the time being. Congress has rejected the inclusion of agricultural workers under the Federal Unemployment Tax Act.

But had Thornton not been on his toes, produce growers today would be bracing for a new onslaught of federal rules and regulations—which would be costly to administer.

For all of his furious activity on behalf of agricultural employers, Thornton's approach belies his intense pace. He is friendly, softspoken, and respectful of all points of view. He obviously communicates.

Like President Nixon and scads of administration officials, Thornton hails from California. There, he was manager of the California-Arizona Farm Labor Assn. at Fresno. He has been on the Washington scene for a year and a half.

He was asked how he achieved his big victory for his organization—especially at a time when many other farm groups are flopping aimlessly around getting nowhere.

Thornton makes no claim to great deeds.

"I wrote to the Senators and Congressmen involved," he said. "Then, I delivered the letters personally. I had to wait around for some of them and I sure read a lot of magazines in the waiting rooms."

What's the secret of success?

"Shoe leather, personal contact, and explaining the position of farmers," he said. "Congressmen are willing to listen and are interested in what you have to say."

Not exactly. Could be in the way you say it—and if you have something worthwhile to say, as Thornton did.

[Excerpt from the Congressional Record, Wednesday, May 20, 1970]

INTENTION TO OPPOSE CONFERENCE REPORT ON H.R. 14705, THE EMPLOYMENT SECURITY AMENDMENTS OF 1970

Mr. HARRIS. Mr. President, the distinguished senior Senator from New York (Mr. Javits), the distinguished junior Senator from Minnesota (Mr. Mondale) and I have previously notified the Senate of our intentions to oppose the conference report on H.R. 14705, the Employment Security Amendments of 1970.

Our opposition to H.R. 14705 is not founded on a disagreement with the basic provisions that are contained in the bill, but because of the fact that the action of the Senate, extending coverage of unemployment compensation to farm employers who have eight or more employees in each of 26 different weeks during the year and to agricultural crew leaders and their employees, was reversed in conference.

A question and answer explanation of unemployment insurance coverage of farm employees provided for in H.R. 14705, as passed by the Senate, has been prepared by the Subcommittee on Migratory Labor. Before the Senate considers the conference report, I think the explanation will be helpful to Senators, and I ask unanimous consent that the explanation be printed at this point in the Record.

There being no objection, the explanation was ordered to be printed in the Record, as follows:

A Question and Answer Explanation of Unemployment Insurance Coverage of Farm Employees Provided in H.R. 14705, as Passed by the Senate

BACKGROUND

President Nixon, in his July 8, 1969 Message to the Congress on the Unemployment Insurance Program, recommended that the Federal Unemployment Tax Act be amended to provide unemployment insurance coverage to agricultural workers who are employed by an agricultural employer who during the calendar year or preceding calendar year had 4 or more agricultural workers in his employ during each of at least 20 weeks.

H.R. 14705, the unemployment insurance bill passed by the House of Representatives on November 13, 1969, did not extend coverage to any farm workers.

The Senate added limited farm coverage to H.R. 14705 on April 7, 1970. The Senate provision (Section 103(b)) provides that farm employers who employ eight or more workers in any 26 weeks of the current or preceding calendar year are covered by the Federal Unemployment Tax Act. However, nonimmigrant alien workers admitted temporarily for temporary agricultural work, who are employed by such employers, would not be covered by unemployment insurance.

Question.—How many farm employers would be brought under the Federal Unemployment Tax Act?

Answer.—23,000 or about 2 percent of all farm employers.

Question.—How many farm jobs would be brought under unemployment insurance protection?

Answer.—250,000 or about 22 percent of all farm jobs. Another 25,000 farm jobs would also be covered, but they are already covered under State laws.

Question.—How big are the farms that would be covered in terms of jobs?

Answer.—Clearly the great preponderance of them will be large commercial farming operations or agri-businesses, most of which have annual sales of farm products of over $100,000. There were 20,000 farming operations that had annual sales of that magnitude in 1964.

Question.—How big are the farms that would be covered in terms of payrolls?

Answer.—A precise answer is not possible. However, in 1964, the 45,000 largest farm operators had average payrolls of $33,000. They constituted only 3 percent of all farm operators, but they paid 53 percent of total farm wages. Clearly, the preponderance of the farm employers who would be covered by the Federal Unemployment Tax Act would be in this group of farm operators.

Question.—Would farm crew leaders be included in this coverage?

Answer.—Yes, a crew leader who was, under common law rules, the employer of at least 8 farm workers in 26 weeks would be a covered employer. By a roll call vote, the Senate deleted a Finance Committee recommendation to exclude crew leaders as defined under the Social Security law.

Question.—How many crew leaders would be covered?

Answer.—It is estimated that there are about 1,000 crew leaders who have 8 or more employees for 26 weeks. This is probably less than one-tenth of the crew leaders in the United States.

Question.—What information do we have about these crew leaders?

Answer.—All of the 1,000 who would be covered are required to pay Social Security taxes for their workers. In fact, about 2,500 crew leaders report covered wages for Social Security purposes each year. In other words, UI coveage would apply to those crew leaders who are apt to be the most businesslike in their operations. Furthermore, virtually all of the 1,000 come under the requirements of the Farm Labor Contractor Registration Act, and hence, most now register annually with the U.S. Department of Labor. This registration involves furnishing a permanent address, evidence of adequate liability insurance, etc. Most important with respect to UI coverage, the Registration Act requires crew leaders who pay migrant workers engaged in interstate agricultural employment, to keep records which show for each worker total earnings in each payroll period, all withholdings from wages, and net earnings. The crew leader must also provide to each worker a statement of all sums paid to him (including sums received on behalf of the worker) on account of the labor of the migrant worker. A directory of all registered farm labor contractors is compiled quarterly by each regional office of the Manpower Administration of the U.S. Department of Labor.

Question.—If a crew leader employs his workers in three different States during a year, where does he pay his unemployment insurance taxes?

Answer.—An interstate crew leader has the same two reporting possibilities as presently covered interstate employers such as construction, sales crews, and traveling circuses and carnivals. In the absence of special arrangements, the crew leader would report and pay taxes to each State in which he operated, based on the wages paid for services in that State.

However, to provide continuity of coverage for individuals working successively in different States for the same employer, 46 States have adopted legislation which enables them to enter into reciprocal arrangements with other States, under which such employment in different States is covered in a single State if the employer so chooses and if the States involved agree. Under such reciprocal coverage arrangements, States and employers willing, the crew leader would report all of the wages of his employees to his home State, regardless of the fact that they performed much of the work in other States.

Question.—Wouldn't there be serious administrative difficulties if crew leaders paid taxes in more than one State or even if they paid taxes in their home State for employment performed in other States?

Answer.—There has been very extensive experience with coverage of employers whose employees work in different States during the year. This is a frequent situation in construction, entertainment, sales, and other industries. Circus workers, for example, work in many more States during a year than do most employees of crew leaders. Since coverage of the 1,000 crew leaders would not be effective until 1972, there will be ample time to prepare for covering them, including informing them of their responsibilities. Also, the coverage of just 1,000 crew leaders will give a basis for research into the feasibility of covering other crew leaders.

Question.—What new administrative arrangements would have to be developed in order to pay interstate claims for benefits filed by migrant workers?

Answer.—No new arrangements would need to be developed. Workers with wages in more than one State present no new problems for the unemployment insurance program and the Federal-State employment security system. The United States labor force has a high degree of mobility. Millions of workers move from one State to another every year.

In 1969, a year of low unemployment, 584.172 initial interstate claims were paid. Approximately 30,000 involved combining wages that were earned in more than one State.

Existing voluntary arrangements provide for interstate benefits to workers in any of 3 different situations. Concern over the rights of mobile workers, aside from farm workers, was great enough to lead to provisions in both House and Senate versions of H.R. 14705 which require interstate arrangements to be universal and mandatory.

The Interstate Benefit Payment Plan, operative since 1938 and applicable in every State, permits a worker who qualifies for benefits in any one State to file his claim against that State from any other State. The Basic Wage Combining Plan, operative since 1945 and now participated in by all but 2 States, permits a worker who has had covered employment in several States but does not qualify in any to have his base period wages in all participating States combined as if they had all been paid in the State in which he files his claim. The Expanded Interstate Plan for Combining Wages, which began in 1956 and in which all but 5 States now participate, applies to a worker who qualifies in one State for less than maximum benefits, and who has base period wages in another participating State or States. Such a worker can have his benefits in the State where he qualifies increased by combining with those wages any base period wages in other participating States in which he does not qualify.

Interstate migratory farm workers, whether they have been employed by crew leaders or farm operators, will be able to file for benefits under these arrangements.

Question.—In simple terms, how is an interstate claim which involves combining wages earned in more than one State processed? (Such a worker would have been employed in more than one State during the base period.)

Answer.—The claimant goes to the State employment security agency office where he is residing. The claims taker interviews him to learn the States where he worked during a base period and to determine which State the claim will be filed against.

If the claimant qualifies for benefits in another State (i.e., he earned enough or worked long enough during that State's base period to qualify), the claim is sent to that State. That State then contacts the other States where he worked to learn how much he earned in covered employment while working in them. That State then pays the claimant a benefit based on his total wages and bills the other States for any charges against their funds.

If the claimant does not qualify for benefits in any single State, the State where he makes his claim contacts the other States where he worked during its base period, combines the wages, pays a benefit based on the total wages, and bills the other States for any charges against their funds.

This process was followed in $30,000 claims in 1969. As noted earlier, H.R. 14705 provides for a greatly improved system of processing and paying interstate claims that involve wage combining.

Question.—What is the effect of the exclusion from unemployment insurance coverage of alien agricultural workers who are admitted to the United States on nonimmigrant visas pursuant to Sections 214(c) and 101(a)(15)(H)(ii) of the Immigration and Nationality Act?

Answer.—A temporary nonimmigrant alien worker is admitted to the United States to do work of a temporary nature. As soon as his employment is terminated, he must leave the United States. A claimant must be in the United States or Canada to receive benefits. Hence, with the exception of Canadians, these workers are not eligible to receive benefits anyway. Canada is a participant in the Interstate Benefit Payment Plan, and all but four States do pay claims to Canadian workers on a reciprocal basis. (H.R. 14705 will require all States to do so.) Canadian agricultural workers now enter the United States for apple and potato harvesting. Both seasons are short (6–8 weeks), and it is doubtful that more than a few of the workers would be employed by farm employers which have 8 workers for 26 weeks. However, since Canadian workers are eligible for benefits on a reciprocal basis, and H.R. 14705 strengthens that eligibility, it may be desirable to exempt Canada from the nonimmigrant alien worker exemption, for purposes of consistency.

Question.—Will all workers who work for covered farm employers be eligible for UI benefits; that is, will persons who engage in farm work for a short time such as students draw benefits?

Answer.—The fact that a worker has been employed by a farm employer who is covered by UI does not mean that he is eligible for benefits. He must still meet the State qualifying requirements which are generally pegged to number of weeks worked, total wages received, or a combination of these. Furthermore, the claimand must meet all State eligibility requirements each week to receive benefits, including being available for, and actively seeking work. In determining whether any claimant is eligible for benefits for a particular week, the agency looks not only at the individual's statement that he is available for work, but at his actions to determine whether he is acting as a reasonable individual who wanted work would act.

Eligibility for benefits would be no different for persons who worked on farms than for persons who worked in other industries. For example, hundreds of thousands of students work in every segment of the U.S. economy during the summer, but with rare exceptions they are ineligible for unemployment insurance benefits when they return to school. Usually they do not work long enough to qualify. Even those who do work enough in the summer to meet the monetary qualifying requirement are not ordinarily considered available for work when they return to school.

[From the Advisor, Unemployment Benefit Advisors, Inc., Washington, D.C., May 7, 1970]

H.R. 14705 COULD BE IN PERIL—HELP!

Yesterday we learned that Senators Javits, Mondale and Harris were circulating a letter among their colleagues urging them to reject the Senate Conferees' Report on H.R. 14705. They object to the Report apparently because the bill adopted by the House-Senate Conference Committee, does not contain agricultural coverage. They are asking the Senators to vote to instruct the Senate Conferees to insist upon provision for covering farm labor.

Such a move, if successful, could well sound the death knell for H.R. 14705. If it is sent back, we foresee the possibility of a repeat of 1966 when U.C. legislation died in Conference for lack of agreement. H.R. 14705 is a reasonable bill and we urged every Representative and Senator to support it as reported from Conference in *Advisor* '70 U.C.–9. We hope you will now join us in doing the same. *Any day* the Conference Report could be considered by the Senate. Every member of this body should hear from employers by phone or wire urging them to vote for the Report as is. Will you please help *today?*

J. ELDRED HILL., JR.,
Executive Director.
HAROLD V. KELLY,
Executive Assistant.

[Press release from the office of Congressman O'Hara, Michigan]

UNEMPLOYMENT COMPENSATION FOR FARM WORKERS

Last year President Nixon sent a message to Congress which proposed that an additional 4.8 million workers be covered by unemployment insurance, including *400,000* workers on large farms employing *four or more workers in each of 20 weeks.*

Because the unemployment compensation bill was taken up by the House under a closed rule and because the Committee bill did not contain a provision covering farm workers, the House did not have an opportunity to consider the specific question of agricultural coverage.

An amendment by Senator Mondale added to present coverage employers of farm workers who employ *eight or more in each of at least* 26 weeks. Under this amendment, an additional 276,00 workers, 22 percent of all farm workers, would have been covered by unemployment insurance, but less than 2 percent of farm employers would have been covered. *Coverage under the Mondale amendment was substantially less than that asked by the President.*

Employers who employ eight or more in each of at least 26 weeks are certainly neither small nor family operated farms. All other employers in the private sector are required by the bill to insure their employees if they employ one or more in at least 20 weeks.

A motion to recommit the conference report on H.R. 14705 with instructions to accept the Senate amendment will be made when it is brought up.

The opposition to extending coverage is usually stated in terms of the high cost of even limited farm coverage. Some testimony before the Ways and Means Committee had cited the experience of North Dakota, which had extended voluntary coverage to some farm employers, and concluded that "If unemployment insurance were extended to nonseasonal farmworkers, costs could run from 10 to 15 percent of taxable payrolls."

However, as Representative B. F. Sisk told the Senate Finance Committee, the North Dakota experience is almost totally unrelated to the proposal before us now. Of the 121 farm employers in North Dakota who had elected coverage, only *1* would have been covered under the Administration proposal, and *none* would be covered under the standards set by the Senate amendment.

There are other jurisdictions with varying degrees of farm worker coverage, and their differing standards make direct comparisons a little difficult. But they can suggest the level of cost. In 1968, 35 employers in *Hawaii* with nearly 10,000 employees, had a cost rate (benefits as a percentage of taxable payroll) of only 1.1%. In 1967–68, Canada's cost rate was 4.5%.

A 1965–66 study in *California* estimated a cost rate for extensive coverage of 9.5%. But the 765 California employers who *elected* coverage for their 17,000 employees in 1968 had a cost experience of 4.5%.

However, to paraphase former Secretary of Labor Schultz, even if farm coverage were to mount to 9.5% or 10%, we could still provide these employees coverage at rates comparable to the costs in other industries where unemployment insurance coverage has been a long-standing tradition. For example, according to Secretary Schultz, the average cost rate for ten California industries closely related to farming was 10.8% in 1967. In that same year, the cost rates for contract construction as a whole was 8.3%, while general building and highway construction both had cost rates as high as 10%.

In summary, then, the actual cost experiences with coverage of the kind the Senate amendment proposes is not as high as the oft-quoted North Dakota experience would suggest; and in any event even these cost rates are not out of line with other industries where coverage is taken for granted.

[Editorial from Washington Post, July 8, 1970]

UNEMPLOYMENT: STILL A SERIOUS PROBLEM

If the decline in the seasonally adjusted unemployment rate from 5 per cent in May to 4.7 per cent in June should mark the beginning of a new trend, it would astonish the chart-watchers. Many economists have assumed that unemployment will reach 5½ per cent on the upward curve that has been in evidence in recent months before a turn for the better can be expected. Others who take a darker view of the general economic climate place the figure at 6 per cent or more. However powerful the hope that these forecasts will prove inaccurate, there is very little to cheer about in the Labor Department's June report.

One reason for the statistical decline was a reduction in the number of unemployed women and teen-agers. But since the labor force showed a shrinkage from 85 million in May to 84.1 million in June, the analysts assume that many women and youths have taken themselves out of the category of job-seekers because the outlook was so bleak. When unusual factors of this kind impinge upon the samples taken by the Labor Department, the adjusted seasonal rate for any given month may convey a quite inaccurate impression.

Certainly there is nothing in the report which relieves the urgency of enacting legislation to extend job-training programs and improve unemployment compensation. The continued stalling of Congress on the unemployment compensation bill is especially curious because the House-Senate conference reached agreement two months ago. The bill is important because it would authorize additional benefits for the unemployed when joblessness has remained at a national level of 4.5 per cent for three consecutive months. It would also extend benefits to 4.8 million additional employees and to a possible 436,000 more state and local employees, if state and local governments should give their approval.

It is said that there is some dissatisfaction in the Senate because the conference committee eliminated two amendments, although one was a rider having no direct bearing on unemployment compensation. The other is an amendment bringing workers on large farms under the system. The bill should not be allowed to fail for want of these amendments. Incidentally, the high unemployment in this period of economic recession also enhances the need for enactment of the bill for protection of workers' rights under private pension and welfare plans, which has made very little progress in either house.

[Excerpts from the Congressional Record, July 23, 1970]

CONFERENCE REPORT ON H.R. 14705, EMPLOYMENT SECURITY AMENDMENTS OF 1970

The SPEAKER. The gentleman from Arkansas (Mr. Mills) is recognized.

Mr. MILLS. Mr. Speaker, I yield myself 10 minutes.

Mr. Speaker, there were a number of points of difference between the House and the Senate versions of H.R. 14705. However, most of the differences were largely technical. Many of them were necessary in order to take care of problems arising merely from the passage of time since the House acted on the bill last year.

There were, however, several matters in conference which I believe deserve some explanation.

Th first two of these relate to the broadening of the coverage under the unemployment compensation program, that is concerning the coverage of small firms and farmworkers under the unemployment compensation program.

The last two concern matters unrelated to the bill.

Mr. Speaker, with respect to the coverage of small firms, the Senate deleted the provision of the House bill which amended the definition of the term "employer." Under present law an employer is defined as a person or firm that employs four or more workers in 20 weeks in any calendar year. The provision of the House bill changed the definition to include persons or firms that employ one or more workers during the 20 weeks in the calendar year, or pay wages of $800 or more in a calendar quarter. The Senate deleted this provision from the bill, retaining the present test of four or more employees in 20 weeks.

The House provision was adopted by the conference report, with an amendment increasing the alternate tax from $800 to $1,500 a year. So in this instance the House prevailed on the basis very largely of the language of the House bill.

Now, Mr. Speaker, with respect to farmworkers who are presently excluded from mandatory coverage under the Federal law, the Senate adopted an amendment extending coverage to persons, other than certain aliens, who work for for employers who employ eight or more farmworkers in 26 weeks in a calendar year. The Senate receded on this amendment.

Mr. Speaker, it is my understanding that the gentleman from Michigan (Mr. O'Hara) intends to offer a motion at the proper time to send the conference report back to the conference committee with instructions to include in the bill the language of the Senate amendment relating to the coverage of farmworkers.

Let me say at this point that the House members of your conference committee took a strong position on this issue in view of the fact that there was no provision covering agricultural labor in the version of the bill as it passed the House and because of the experience which the House members in the conference committee had gained in working upon this issue during executive sessions of the Committee on Ways and Means. The Committee on Ways and Means spent many, many hours attempting to agree upon a provision extending employment coverage to farmworkers. Because of the many problems the committee encountered it was unsuccessful in its attempt to adopt a workable provision.

Mr. Speaker, the peculiar nature of the agricultural labor force, which is made up of many migrant and sporadic workers, is the principal cause of most of the difficulties that the committee encountered. Serious objections relating to costs and administration presented themselves due to the makeup of the farm labor force.

Recognizing the many problems that have to be dealt with in order to extend unemployment compensation coverage to farmworkers, the conferees modified another section of the bill to provide that in conducting the research program authorized under the legislation, first attention—now, bear this in mind—first attention be given to coverage of agricultural labor under the unemployment compensation program.

Mr. Speaker, I believe—and I am refering to this requirement for a study—that this is the most prudent course of action that could be taken on this issue at the present time. Although the issue of coverage of farm employment under the unemployment compensation system has been discussed for many years, the problems relating to it have never been adequately dealt with. Even the limited data we have obtained, based on the experiences gained in those few States that have covered agricultural workers under their programs, has not been analyzed as I think it should be. I therefore feel that we should have the benefit of a concentrated study of the issue before we take legislative action to require the States to cover farm workers.

I am sure that we will learn a great deal from such a study, and that on the basis of the knowledge we gain from it we will be able to draft legislation specifically designed to cover such employment under the system in a manner that will take into account the unique nature of farm employment.

Mr. Speaker, let me interpose at this point to point out that under the Senate provision, first of all, in order for a farmer to qualify for coverage it is necessary for him to have at least eight employees working for him in each of not less than 26 weeks in that year. But those are not the only employees who would be covered when once this trigger is released. All of his employees would be covered—not just those eight—but all of them would be covered.

We had no real problem in the committee—we had no real problem in the conference—about covering those employees of the larger farm operations who are permanently or almost permanently employed by the same farm employer, but we had a great deal of difficulty in the coverage of the other sporadic employees who would come under the program as a result of a particular employer being covered.

Now, about half your farm laborers are employed in the State of California, and in that State the department of employment has made a study for a State legislative committee, and it is one of the very few that have been made. They point out in the study that short-term and intermittent workers play a major role in the production of California's crops and that even among the farmworkers who are firmly attached to the labor force there is chronic unemployment.

Under the California unemployment tax the farm employers are not paying fully for the benefits received by unemployed farmworkers because the tax rates do not go up as high as the benefit cost rates for such workers. Now, that means, then, that the other employers within the State under the provisions of the Senate amendment would have to pick up the tab for a substantial portion of the cost of covering these farm employees. I feel that this is highly unfair to the other employers in the State.

From information given to us by the Department of Labor in connection with our executive sessions, the benefit cost rate to provide benefits for unemployed farmworkers in California was estimated to be 9.5 percent, while the benefit cost rate for all industries in California was 2.4 percent, and bear in mind there is a top tax rate in that State of 3.7 percent permissible under the law. It would clearly appear from this that the benefit outgo in that State for farm coverage would amount to approximately $40 million per year, whereas agricultural employers, even at the maximum permissible tax rate, would contribute only $20 million toward that cost. Thus, other California employers would have to pick up the tab for the difference.

That is just an instance of one of the many problems that exist in this whole area where we think it is much better for us before we finally legislate to have far more information than we presently have. And that we will have, in our opinion, as a result of the study that the conference report directs shall be made.

Mr. Speaker, there is one amendment that we rejected in the conference that I am afraid—if we go back to conference—we well might have to take in order to have a bill at all.

That has to do with the amendment that was offered, which is not germane to this subject matter, but on which the Senators were most insistent in the conference. That would require the Secretary of the Treasury to issue a special type of savings bond paying—mandatory paying—6 percent interest.

The Senate in this instance receded. But, if we go back, I am concerned very much about what might happen in conference on this amendment.

Now why am I opposed to the amendment? In the first place, the amendment will drain out of savings accounts which are largely held by your savings and loan institutions many of the deposits in those institutions because none of them that I know anything about have a rate of interest over an extended period of time of 6 percent for the duration of these savings bonds that we have in this amendment.

I think many, many people will go to the extent of taking money they have from their savings out of the savings and loan industry and deposit that money in these bonds at higher interest rates and thereby further reduce the amount of money that is in the savings and loan institutions that can be used for housing.

From what members of the Committee on Banking and Currency tell me, that industry is already in enough of a depression without adding to it by the acceptance of this type of amendment.

The second of the unrelated provisions added by the Senate amends the Securities Act of 1933 and the Securities Exchange Act of 1934 to provide that industrial development bonds the interest on which is excluded from gross income under section 103 of the Internal Revenue Code of 1954 are to be exempted securities. The House receded with an amendment to exclude from the coverage of the Senate amendment bonds substantially all portions of which are to be used to provide residential real property for family units or for the acquisition or development of land sites for an industrial park, unless such bonds would qualify under section 103(c)(6) of the Internal Revenue Code relating to exemption for certain small issues. The conferees did not intend to require registration of any security which is exempt from registration under existing law. Thus, the amendment will not change the exempt status under section 3(a)(2) of the Securities Act of 1933 or section 3(a)(12) of the Securities Exchange Act of 1934 of bonds or other obligations issued by housing or mortgage finance agencies of States or local governments where the programs of these agencies are administered by the agency or by the State or local government.

Mr. Speaker, let me emphasize, if I may, the fact that the conference report we are voting upon today represents the culmination of many months of work on the part of both Houses of Congress and particularly on the part of the Committee on Ways and Means. The legislation contained in this bill was fashioned during many months of work on the part of our committee over a period which started 5 years ago. The committee first took up this legislation in 1965 when it held several weeks of hearings on what was the administration's proposal at that time. The committee went into executive session early in 1966 and rewrote that legislation, producing its own bill—H.R. 15119—which was adopted by the House and later passed by the Senate. That legislation unfortunately died in conference over the problem of Federal standards. The Senate conferees were adamant in their position that the provisions relating to Federal standards that the Senate had adopted should remain in the bill. The legislation we are now acting upon is basically the same as the 1966 bill. I might point out that the 1966 bill passed this House by a vote of 374 to 2, and the present bill passed the House on November 13, 1969, by a vote of 337 to 8.

Mr. Speaker, the legislation contained in the conference report enjoys broad support throughout the Nation. If the conference report is not adopted, it would be a great loss to everyone concerned. The reforms contained in the bill relating to unemployment compensation coverage, the extended benefit program, judicial review, and the bill's other provisions are desired by labor, business, and the State agencies that have responsibility for administering the unemployment compensation program. I, therefore, urge my colleagues in the strongest terms possible not to jeopardize this legislation but to vote against any motion that may be made to send the conference report back to the conference committee.

Mr. Speaker, I think the conference report should be adopted. I do not think it should be returned because there is always the danger that you cannot come back with a conference report that would be satisfactory to all of us because this matter has been before the Congress now for 5 years.

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Mr. O'HARA. Mr. Speaker, as the distinguished chairman of the Committee on Ways and Means has indicated, it is my intention when the previous question has been agreed to on the conference report to move to recommit the bill to conference with instructions to the managers on the part of the House to agree to the Senate amendment which would provide unemployment insurance coverage of employers of farm labor who employ eight or more workers during each of 26 or more weeks a year. It has been suggested by the chairman that a good deal of the hesitancy of the membership of the Ways and Means Committee and others who entertain doubts about this proposal was occasioned by their fear that the cost of the proposal would be excessive, and there was testimony before the committee to the effect, and I quote that testimony:

"If Unemployment Insurance were extended to nonseasonal farmers, costs could run from 10 to 15 percent of taxable payrolls."

That allegation was based on an experience in North Dakota. I think it is worthwhile to examine some information about that experience that was not available when this question was before the committee.

The North Dakota experience, on which this dire prophecy has been based, involved 121 farmers, that is all, and the 121 farmers altogether employed 148 workers. Not a single one of those 121 North Dakota farmers whose experience serves as the basis for this charge of excessive cost—not a single one of them would be covered by the proposal that I will make today. They were small farmers who would not be covered under this proposal. In fact, costs do not run anywhere near that high in States where we have more experience.

In Hawaii, the only State in which there is full coverage of farm workers under unemployment compensation insurance, you cannot say with exactitude what the cost has been for all of them, but among the portion of them which have chosen to be self-insured, the cost has been very low—less than 2 percent of taxable payroll.

In California, where a large number of big growers have elected coverage, the cost has been 4.5 percent of taxable payroll. And a California study just a few years ago suggests that if all California farmers were covered, large and small the cost would be less than 10 percent.

But even if we accepted this prophecy of high cost, is that a good reason to deny coverage? If the costs were going to be high, why would they be high? They would be high because unemployment is a frequent occurrence among those workers. They would be high for the same reason they are high for the construction industry: Because their workers are more apt to be unemployed. Are we going to adopt the philosophy that the only workers who ought to be covered by unemployment insurance are those who are unlikely to need such protection?

It has been suggested also that a study will be conducted to see the best way of going about this. The Department of Labor in a letter signed by the former Assistant Secretary for Manpower, Arnold Weber, who has gone over to the White House staff with the former Secretary, Mr. Shultz, has indicated in response to a question about the need for further study:

"The Department felt that there was sufficient data available from earlier studies and experience to demonstrate the feasibility of coverage of large farms. And Secretary of Labor Shultz so advised the Senate Committee on Finance in his testimony on February 5, 1970."

Mr. Speaker, the unemployment insurance system was enacted into law in 1935. Thirty-five years ago the farm workers were excluded from coverage. I would think that 35 years, Mr. Speaker, is a long enough time to study the problem. Perhaps what we ought to do now is to provide just a little bit of coverage, and maybe that is the way we can learn more and the proposal I make provides very little coverage indeed. Less than 2 percent of all farms in America would be affected by this proposal.

Mr. BINGHAM. Mr. Speaker, will the gentleman yield?

Mr. O'HARA. I yield to the gentleman from New York.

Mr. BINGHAM. Mr. Speaker, I thank the gentleman for yielding.

Could the gentleman tell us how many employees and how many farms would be affected by this? I am impressed that the gentleman is talking about farms of only very considerable size.

Mr. O'HARA. The Department of Labor has advised us that 276,000 farmworkers would be benefited by this proposal. I cannot from memory give the gentleman the number of farms, but it would be less than 2 percent of all farms.

Mr. BINGHAM. Mr. Speaker, I thank the gentleman.

Mr. O'HARA. Finally, it has been suggested, Mr. Speaker, that adoption of this change—what I am proposing is to ask the managers on the part of the House to go back to the Senate conferees and take just one more provision from their bill—would somehow endanger the entire bill. Mr. Speaker, if I thought there was the slightest danger that this proposal would endanger the passage of this bill, I would not be in the well of the House at this minute.

As the gentlewoman from Michigan has pointed out, unemployment is today a very serious problem. According to the Governor of Michigan, there are 62,000 Michigan workers who are about to exhaust their unemployment benefits who need the passage of this legislation. I can assure the Members that I feel that need just as deeply as any Member of this House, and I would not make a proposal which would endanger the passage of this bill. Indeed this proposal does not do so. The Senate could hardly object to the House conferees saying we want to take one more provision of your bill that we did not take before. That could hardly endanger this proposal.

Mr. Speaker, the time has long since passed when we ought to show some indication of concern about the systematic exclusion of farmworkers from the laws that we have enacted to protect other workers in this country.

Even though the farmworker is more apt to be disabled on his job than almost any other worker, he is covered by workmen's compensation in only five States.

Even though the farmworker receives the lowest wages of any industrial worker, only some of them are covered by Federal minimum wage laws and those who are covered are covered at a rate 30 cents lower than other workers.

Even though the farmworker is engaged in hard physical labor, the child labor laws which apply to every other industry do not apply to agriculture.

Even though the farmworker is part of the economically weakest group in America, he has no legally protected right to organize and bargain collectively for himself, and a farmworker can be fired or blacklisted for union sympathies.

Even though the farmworker is more apt to be out of work than any other worker in America, he is covered by unemployment compensation only in Hawaii and Puerto Rico.

This is a modest proposal we are making here today. It is unfortunately a water-down version of the Nixon administration proposal of last year. It would cover all too few farmworkers, less than half of the total.

But it would be a beginning, Mr. Speaker, a beginning that is long overdue.

Mr. WATTS. Mr. Speaker, I yield 10 minutes to the gentleman from Wisconsin (Mr. Byrnes).

(Mr. Byrnes of Wisconsin asked and was given permission to revise and extend his remarks.)

Mr. BYRNES of Wisconsin. Mr. Speaker, for a long time now the unemployment compensation laws of this country have been in need of revision and change. We tried to move in that direction in 1966, when we passed a bill in this House. At that time the Senate also passed a bill, but no agreement could be reached in conference, so the much needed changes went by the board.

We began the effort again last year, recognizing that some very important changes should be made in the program. Now we have reached an agreement on legislation. It passed the House by an overwhelmingly large margin—337 to 8. The Senate also passed legislation, and we went to conference on the differences.

We have worked out the differences. We come here now with a good conference report and ask this House to accept it and not endanger enactment of these needed improvements by further conflicts or controversies.

It is all well enough to say, "This is a matter that has been agreed to as a Senate amendment." But let us understand there were other changes which were made in conference, which all become opened up, if the motion to recommit with instructions is agreed to. This will not go back to conference with the conferees limited only to this area. Let us remember that.

All the differences that were ironed out—and I believe they were ironed out, so far as the House position is concerned, in a most satisfactory way—will be open again. I believe that the need for the changes we are making in this bill are so great that we should not jeopardize its enactment into law.

One of the most important changes, in addition to increasing coverage for 4.7 million workers, involved in this legislation is the provision for automatic extended unemployment compensation benefits. The chairman and I have been working for years to try to get this program written into the basic law of this Nation. This will finally have been done if we adopt this conference report today. Let us not jeopardize this goal by sending the report back to conference.

I speak to you as one who tried in the committee to make a start in the area of covering farm workers. There is no question but that this is a most serious problem. I was hopeful we could make a start and experiment with at least covering employees who are comparable to the industrial employees already covered. However, we could not arrive at a satisfactory method for doing so. I tried again in conference to arrive at a reasonable method of covering this type of farm employee.

At the conference we were unable to reach an agreement on this issue. Let me emphasize that the Senate provision for covering farm employees has many problems. Yet if you adopt this amendment to recommit, you instruct us to take verbatim the amendment that the Senate adopted. Yet the Senate amendment is not a satisfactory basis for taking this first step toward coverage of farm employees—a step that I want to take as soon as we can. As I said, I do not see any difference between a large farm operation that has eight or 10 full-time employees throughout the year, and a nonfarm business establishment with the same number of employees. Let us remember, though, that the Senate bill is much broader than that. It covers the full-time employees, but in addition, taxes the employer on a lot of employees he may have on a temporary basis that will never qualify for benefits.

I think the gentleman from Michigan should recognize the difference between the question of requiring an employer to pay a payroll tax on an employee, and the question of whether that employee is going to qualify for a benefit. In agriculture, we have a large number of individuals who work but a very short time during the year—not only a short time for any one employer but in any employment. It is estimated that in 1968 some 70 percent of farm workers worked less than 75 days during the course of the year. They were students and others who may simply have helped out at harvest time. Additionally, 44 percent worked less than 25 days a year, and averaged about 10 days a worker during the year. You can say that you are going to cover them, but all you are doing is imposing a payroll tax on an employer for an employee who is never going to be eligible for benefits. Let us recognize that many of the employees who would be covered would never receive any benefits. Now, that is a good way to promise something and not deliver it. I believe we have to do something better than that. We cannot work out those problems today.

Mr. Speaker, I do not believe it is appropriate to place an additional tax on an already overburdened agriculture unless we are providing a meaningful solution to the problem. I do not think that the Senate bill does that. I hope that the studies and data that will soon be available—some of them under the terms of this bill—will provide a basis for covering agricultural employees with a continuity of employment.

Mr. Speaker, let me point out another problem. The administrative problems are most difficult in covering agricultural employment, particularly with reference to the interstate movement of many workers. Our attention has been directed to the experience of the State of Hawaii. However, the State of Hawaii does not have the problem of workers moving from State to State, which involves determining which employers and what State funds will be charged for benefits, and which State law will govern the amount and duration of benefits. Those are problems that have to be worked out if this Congress is going to take sound action and exert sound judgment in this area.

Mr. Speaker, I speak to you as one who feels most sincerely that we have to make an effort to solve this problem, but I do have to say what I think happened——

The SPEAKER. The time of the gentleman from Wisconsin has expired.

Mr. MILLS. Mr. Speaker, I yield to the gentleman 5 additional minutes.

Mr. BYRNES of Wisconsin. I thank the chairman of the committee for this additional time.

Mr. Speaker, let me say that I think the debate this afternoon on the motion is a good thing. It points out the interest in this subject. In my opinion it gives momentum to an effort to cover our farmworkers on a sound basis. Certainly, many of them need our help and assistance. They are in a sad plight. As one who wants to do that, let me say that it would be a mistake to place this entire bill in jeopardy by sending it back to conference to accept a provision, written into the bill by the Senate, that it is not in my judgment a satisfactory solution.

Mr. Speaker, if we had a latitude and time, perhaps we could work something out, but that is not what is being given us. The action recommended by the conferees requiring the Labor Department to give priority attention to studying the problems of extending coverage to agricultural workers is the course we should now pursue.

There are other studies being made, also. Ohio State University and the University of Connecticut are making studies in cooperation with the Department of Labor on the problem of covering the farmworker under unemployment compensation.

Mr. O'HARA. Mr. Speaker, will the gentleman yield?

Mr. BURNES of Wisconsin. I yield to the gentleman from Michigan.

Mr. O'HARA. Mr. Speaker, I would like to just suggest to the gentleman, if I might, that I think the problems are not quite that difficult. The States decide, of course, who is covered and who is not covered, and we would not want to try to cover anyone who is not employed.

Mr. BYRNES. of Wisconsin. Not if we say agricultural workers have to be covered. They have to cover agricultural workers if we require it, just as they are going to have to cover the workers in an establishment with one or more employees in 20 weeks. The States can go further than this; but they must at least meet the requirements of Federal law.

Mr. O'HARA. If the gentleman will yield further, we do not propose to change the work test, that is, the individual worker's test, and in California he has to have earned $750 during the base period.

Mr. BYRNES of Wisconsin. And that is why they would not get any benefits. The Senate amendment would tax the employer, but it would not do anything for this poor worker whom you and I both want to do something for.

But I do not think it is a good argument to say just because a tax is going to have to be paid on his wages that he is going to receive benefits, because he still has all the other tests to comply with.

Mr. O'HARA. If the gentleman will yield further, I just think that of course we would not want to cover the housewife who goes out to a farm to work for a few days, or a schoolboy who goes out to work on a farm for a few days; that is not the broad coverage we are after.

Mr. BYRNES of Wisconsin. But why tax the employer, then? Why tax the employer on that person for that person's services? Why put that burden on agriculture?

Let me yield to the chairman, if I may.

Mr. O'HARA. Mr. Speaker, if the gentleman will yield further for just one moment, so that I can make just one concluding statement concerning this—and I appreciate the sincerity of the gentleman on this matter, but I think if the problems were as difficult as the gentleman has described them to be here he would not have supported this proposal the way he has.

Mr. Byrnes of Wisconsin. I never did support the Senate proposal. I tried in conference to develop a workable basis for achieving coverage. I opposed the Senate language and the amendment that the gentleman now wants us to be directed to accept. I opposed that. But I did try in conference to see if we could not work out some compromise.

Mr. O'Hara. The gentleman did support the administration proposals, did he not?

Mr. Byrnes of Wisconsin. No, I did not. No, I did not. I thought there were problems involved with the proposal, but I thought we might possibly find a proposal we could agree on. I think at one time we did come fairly close to a provision that the administration generally agreed with, and I though it was pretty much in keeping with what I could agree to.

But if you are talking about the Senate version and about the conference, I did not support the amendment as adopted by the Senate.

The Speaker. The time of the gentleman has again expired.

Mr. Mills. Mr. Speaker, I yield 2 additional minutes to the gentleman from Wisconsin.

Mr. Speaker, will the gentleman yield?

Mr. Byrnes of Wisconsin. I yield to the gentleman from Arkansas.

Mr. Mills. Mr. Speaker, I merely want to attest to the fact that I remember distinctly that the gentleman from Wisconsin offered certain amendments to the administration's proposal for the inclusion of farmworkers. The gentleman did not vote to support the administration's proposal just as it was presented to us. The gentleman and I both voted for amendments to that proposal, trying to work something out.

Mr. Byrnes of Wisconsin. That is right.

Mr. Mills. Something that would cover these people who are involved here, but not all of the other people whom the gentleman from Michigan himself says he is not trying to cover, but are covered, as far as the tax is concerned.

Mr. Byrnes of Wisconsin. That is the important part.

Mr. Mills. That is why we tried to emphasize why we needed some study of the language as to just how we should do this. I think that people who are fully employed and employed for this length of time should be covered, frankly, by these larger operations. I do not think that, because they are covered for these people, that now they shall be automatically taxed for everybody else who works, even if they work one day a year.

Mr. Byrnes of Wisconsin. That is right.

Mr. Corman. Mr. Speaker, will the gentleman yield?

Mr. Byrnes of Wisconsin. I yield to the gentleman from California.

Mr. Corman. Mr. Speaker, I wonder if the gentleman could tell us specifically the differences in the Senate version and the version which the Committee on Ways and Means voted down, and a version which admittedly was different from the administration's, but more restrictive?

Mr. Byrnes of Wisconsin. I must confess to the gentleman I would not trust my recollection now to state the differences between them. As far as I was concerned I was trying to produce out something that was workable, not something that was necessarily part of the administration proposal.

Mr. Corman. Mr. Speaker, will the gentleman yield further?

Mr. Byrnes of Wisconsin. I yield to the gentleman.

Mr. Corman. As I understand it, the Federal law defines "employer" and we leave it to the State law to define the length of time an employee must be employed to be a beneficiary.

I do not recall that in the Committee on Ways and Means we had legislated as to a definition of "employee." Our effort was as to the "employer" admittedly. The motion nearly carried.

Mr. Byrnes of Wisconsin. If the gentleman will remember, we were trying to develop a formula covering employers, based on the number of employees they had for a specific time. The actual tax liability of covered employees would have been further limited by exempting wages during a quarter that fell below a specified minimum. A higher proportion of employees on whom a tax was paid would, therefore, have a chance to qualify for benefits if unemployed. Under the Senate amendment, if an employer has eight employees for 20 weeks and then they have at some point 100 more persons for 2 weeks, he would be taxed on those 100 employees who are never going to get any benefit.

Let me just conclude by saying that I think it would be an error now to jeopardize all of the work that has been involved for at least 3 years by sending this back to conference.

The SPEAKER. The time of the gentleman has expired.

Mr. MILLS. Mr. Speaker, I yield 5 minutes to the gentleman from California (Mr. Sisk).

(Mr. Sisk asked and was given permission to revise and extend his remarks.)

Mr. SISK. Mr. Speaker, representing a district which would probably be affected to a greater extent than almost any district in America, I rise to support the motion which will be made by the gentleman from Michigan (Mr. O'Hara).

As one who represents a very large agricultural area, and a substantial part of the largest agricultural producing State in America, I recognize that there are problems in this situation.

My particular area is under considerable attack at the present time and has been for several years in connection with farm labor. We have had peddled across this country a great deal of misinformation about the way we handle our farm labor and the wages we pay.

I may say very frankly that I, for one, vigorously opposed the boycott which has been leveled, and I think most unfairly, against a group of innocent California producers. Yet, on the other hand, for all too long I think we have swept under the rug the problem of farm workers, the people who furnish the labor to make it possible for us to be the best-fed Nation in the world.

This is a subject that I have discussed at great length for a period of a number of years with the farmers who have to pay those taxes we are talking about here this morning.

Unfortunately, the decision made by the Committee on Ways and Means at the time that this matter was under consideration was predicated upon very poor information.

I am not being critical of the gentleman from Arkansas nor of the gentleman from Wisconsin (Mr. Byrnes) because I appreciate the efforts they have both made. They have both talked to me about this and I have discussed this with other members of the Committee on Ways and Means. I appreciate the efforts that have been made.

Unfortunately, their decision was finally predicated upon, and decided upon, bad information pertaining to the State of North Dakota.

Over a period of 16 years, this is the first time I have appeared before the finance committee of the other body. I did on this occasion.

I am not sure that I had any particular influence but I do appreciate the fact that they did insert the Mondale amendment which frankly is far more restrictive as to coverage than that proposed by the Nixon administration.

So it seems to me today after some 35 years, as has been recited by the gentleman from Michigan, there has been a lot of study in this area, a lot of thought given, and there has been experience. We have had experience in Cailfornia. Frankly, the experience in California in connection with those farmers who have elected to be covered has been such as to show a far lower cost than that pertaining to the processing industries themselves. At present in my State all the processing areas are covered, the food processing plants, the packing plants, and yet, if you are familiar with them, they operate a few months in the year and they are closed down the balance of the year. Yet those people are covered.

We have shown from experience in California a lower cost for those farmers who have elected to be covered and for farmers who would fall under the provisions of this proposed amendment than the construction industry has in connection with unemployment insurance.

There are a lot of facts, there has been a lot of study given, and I just feel that it is unfair to say in connection with the farmworkers, "Well, we have got to continue to look at it, we have got to continue to study it, we have got to sweep it under the rug."

Let me say in conclusion that we are faced with a situation nationally in which we are simply going to have to recognize that these people are human beings. They are Americans. They are entitled to consideration.

We in California, of course, are faced with a serious situation today, and we have been faced with it for the last several years. I realize other areas of the country have escaped, but your time is coming. These people are entitled to some consideration. Our farmworkers are going union very rapidly. I think they have a right to bargain collectively. As the gentleman from Michigan has indicated, in most cases we have exempted them from various other laws. Now it seems to me that this tiny step should be taken and the time has come to take it. I just feel that the excuses that have been offered are excuses that we should no longer have to live with, and that this experience should be gone through with this very narrow coverage of less than 2 percent of the large farms in America.

As I have said, my district is covered on a per capita basis by more of these farms than any other district in America and, therefore, I urge the adoption of the O'Hara motion in order that we might move ahead to correct some of the injustices of the past.

Mr. McFall. Mr. Speaker, will the gentleman yield?

Mr. Sisk. I yield to my colleague from California.

Mr. McFall. I wish to commend my colleague from California for his statement and for his diligent work on this issue and to say that I join him on this amendment. Our districts have the same characteristic. We are contiguous. We share the same problems, and I believe we need this unemployment insurance coverage for farmworkers.

Mr. Mills. Mr. Speaker, I yield 5 minutes to the gentleman from Hawaii (Mr. Matsunaga).

(Mr. Matsunaga asked and was given permission to revise and extend his remarks.)

Mr. Edwards of California. Mr. Speaker, will the gentleman yield?

Mr. Matsunaga. I yield to the gentleman from California.

Mr. Edwards of California. Mr. Speaker, today I plead with my colleagues to recommit the conference report on H.R. 14705, to unemployment compensation bill, with instructions to accept the amendment covering a token number, approximately 22 percent of farmworkers. This is a modest proposal and I use the word "plead" advisedly. I would happily deliver these remarks on my knees if that would make them more persuasive and would not offend the decorum of this august place. For I tell you there is not a single action this House could take today that would do more to alleviate human suffering in our land and to erase an ancient injustice. And thereis not one argument against this action that will stand up under close scrutiny. But our action today will be scrutinized—and judged—by those who are familiar with the terrible hazards that are part and parcel of the daily lives of our farm working families, by those who are wondering whether such barnacle-encrusted institutions as this can comprehend and treat the illnesses of our society, by that sea of young people to whom we recently extended the vote. But rather than appeal to the political instincts, I would direct this plea to that which is highest and best in each of us—to our concern for our fellow men.

Perhaps my colleagues read in the Washington Post this week the story of the infant migrant child with pus draining from its ear, sucking from a bottle of sour milk. Born of migrant farmworkers, in total innocence, in the very beginning of its life, it was condemned to death or to a life of misery and incalculable hardship. In weighing the question before us, it would be well if my colleagues would keep this image in mind, the picture of the dying migrant child. In a very real sense, our society is responsible, we are responsible. The child's fate is a consequence of our neglect and abuse. The migrants are the most neglected and abused group in our society, and the most impoverished.

The question now is whether to extend unemployment compensation insurance to some 275,000 farmworkers on 2 percent of the Nation's farms, whether to extend to them the same protection enjoyed by more than three-quarters of the workers in the United States.

At this moment the attention of the Nation is being focused on the plight of our migrant farmworkers, so I will not belabor you here with more descriptions of the hardships and hazards of their lives. I will use the time to answer the objections that have been raised against this measure.

First, the cost. The objection is that it would be too expensive to administer. There is no evidence the cost would be out of line with other industries where coverage is taken for granted. But that question aside, a nation that pays out $3.2 billion annually in farm supports cannot in good conscience deny this minimum benefit to its farmworkers. In California's Central Valley last year, seven major farm corporations received an aggregate of $14 million in farm supports. The Washington Post story referred to above pointed out that the Federal Government spent $419,000 on migrant health services in two counties in Texas during fiscal 1967. During that same period, in the same area, the Government spent $3,564,000 on eradication of disease in animals. In fiscal 1969, the disparity was even greater—$564,677 for migrant health and $5,502,000 to control animal diseases. Such shameful comparisons are plentiful. Since only 2 percent of the Nation's farms would be affected, hardship to the farms is hardly a valid objection. The third and final objection—that the mobility of the migrant would make it difficult if not impossible for State and Federal agencies to administer the program—is equally invalid but deserves to be answered in some detail.

The popular conception of the migrant farmworker is that he is continuously on the road. That is not the case. Most migrant families travel only 4 or 5 months of the year. The remaining 7 or 8 months they maintain a permanent or semi-permanent residence in their home State. Furthermore, 67 percent of all man-days of agricultural employment are attributed to regular and year-round farmworkers. Many of those who do not work full time on large commercial farms find employment in nonfarm jobs near their homes to complete their year-round employment. The migrant farm family then, is mobile but not rootless. It seeks as much stability as its perilous occupation will allow. By extending unemployment insurance to this group the Government would enhance its stability. The long range benefits both to the farm working families and to society as a whole are obvious. By increasing their stability we would enable their children to have the same continuity in education that the children of other workers enjoy—a continuity that is essential to scholastic success and eventual upward mobility.

Mechanization is further disrupting the migrant way of life, forcing families out of the migrant stream and into urban ghettos where, if they cannot compete successfully for the limited number of unskilled jobs available, they must go on welfare to survive. For many this marks the beginning of family demoralization and disintegration, with all of the attendant social evils of "generational dependency" and delinquency. From a social point of view, from a government point of view, from a human point of view, this is a far more expensive course than the one proposed. We can help break that pattern by extending to these farmworkers unemployment insurance. It will give them the stability all people need to better their circumstances. It will help them to become full-fledged members of a permanent community.

No occupation is more hazardous than that of the farmworker, who must often take his wife and sons and daughters into the fields to eke out enough income to survive the full year. In 1967 there were 2,700 fatal accidents and 230,000 disabling injuries in agriculture. The percentage increases in fatalities and disabling injuries in farmwork led all other industries during the past 10 years. In California, a major agricultural State, the occupational disease rate among farmworkers in 1967 was more than 50 percent higher than the next leading industry and three times higher than the average of all other industries.

But neither statistics nor rational arguments will prevail against closed minds and hearts, so once again I appeal to the humanity of my colleagues. The cost of our failure to act will quite literally be paid in human lives. The cost of our approving this action will be small compared to the benefits to farmworkers and to the larger society.

(Mr. Edwards of California asked and was given permission to revise and extend his remarks.)

Mr. Matsunaga. Mr. Speaker, as a Representative from the only State which extends unemployment compensation to agricultural workers on a mandatory basis, I rise in support of the motion to recommit to be offered by the gentleman from Michigan (Mr. O'Hara) with instructions to accept the Senate amendment.

Mr. Speaker, the proposal is a modest one, less extensive, in fact, than what the administration itself has proposed. Only farm employers with eight or more workers each, employed for 26 or more weeks would fall under the coverage. The so-called family farm will not be included.

The major objection to this proposal is not farmworkers do not deserve to be covered, for the virtues of farm workers have been extolled unanimously by Members of this body. It is not that the program would be difficult to administer, for the administration itself has proposed an even more extensive program. The objection is that the cost will be too high.

Let us, then, look at Hawaii's experience. Hawaii's experience shows that the cost to the farm employer has been less—I repeat—has been less than to the nonfarm employer. In 1964, for example, it was 1 percent to the farm employer.

On the basis of percentage of the payroll, as compared to 1.6 percent to the nonfarm employer. In 1965 and 1966 the figures were 1 percent for farm employment and 1.3 percent for nonfarm employment. In 1967 and 1968, for farm employment 1.1 percent of payroll, and for nonfarm employment 1.6 percent. So the experience of the only State, which for 11 years now has had mandatory unemployment compensation for agricultural workers, shows that the cost is far less in the agricultural industry than in nonagricultural industry. This, I believe, ought to dispel all fears on the part of Members who feel that this program would be too costly to be borne by farm employers.

Mr. MEEDS. Mr. Speaker, will the gentleman yield?

Mr. MATSUNAGA. I gladly yield to the gentleman from Washington.

Mr. MEEDS. Mr. Speaker, there has been much ado made here over the fact that once the employer is covered, he is going to have to pay for employees who do not reach the coverage stage themselves, but is not the same thing true with the industrial employers today who are covered? Once they reach the coverage, they pay for all their people based on their payroll and not on how often people work. Is that not true in industry too?

Mr. MATSUNAGA. The gentleman is correct. In that connection, I might point out that the law presently covers building and road construction workers, and the cost is as high as 10 percent of the total payroll, including seasonal workers. Certainly no one would suggest that coverage of these construction workers should be discontinued because of the high cost.

Even with 15,463 seasonal workers in the pineapple industry in Hawaii, the cost to the employer has been as low as 1.1 percent. This low cost experience in Hawaii's 11-year history of unemployment compensation for agricultural workers would seem to indicate that the cost of extending coverage to agricultural workers as proposed in the Senate amendment would be far less than in the construction industry. For this reason, Mr. Speaker, the agricultural worker should be granted equal consideration.

Acceptance of the Senate amendment would be a precedent but important first step toward giving equal treatment, long overdue to the agricultural worker who forms the backbone of our Nation's economy.

Mr. CORMAN. Mr. Speaker, will the gentleman yield?

Mr. MATSUNAGA. I yield to the gentleman from California.

Mr. CORMAN. Mr. Speaker, I thank the gentleman for yielding.

I have refreshed my memory on what was said by the gentleman from Wisconsin. There is a difference in the Senate version from that which we voted on in the committee, there was a substantial support in that committee for covering employers who employed eight employees for 26 weeks. Second, we did restrict the people covered to those who earned at least $750 per quarter. There would be almost no hardship to anybody with or without that limitation. Certainly it is a badly needed improvement in the field of farm labor. If we are going to to be able to solve our farm labor problems in an orderly fashion, we are going to have to extend the same kind of protection to them that we do to the industrial workers.

Mr. Speaker, I urge a yes vote on the O'Hara motion.

Mr. WATTS. Mr. Speaker, I yield myself 8 minutes.

Mr. Speaker, we passed this bill, as has been said heretofore, through this House by a large majority. It was passed by the Senate and, among other things, an amendment was put in it, that was ill-conceived, which covers farmers. Certainly everybody recognizes that there are many farm laborers who, under the right kinds of conditions and after appropriate legislation has been enacted, are entitled to the same coverage as some employees of other industries. But this motion that shall be made will adopt a hodge-podge amendment put in by the Senate that will not do what its proponents think it will do and will work a tremendous hardship on the farming industry.

Mr. Speaker, we went to conference. We agreed unanimously, both the Senate and the House, on a conference report that extends coverage under our unemployment compensation system to practically 5 million more people.

In our report we ordered that the Department of Labor make an expenditious and extensive study of the proper way to cover farm labor, so that it will not be a tremendous impediment to our farmers and so that it will do something to help those farm laborers who work for long times and then are laid off from work.

I am sure that they will come forth with a sound program, and perhaps one we can live with.

In addition to that, in Connecticut a university is making a study of the same situation. Ohio University is making a study of the same situation.

I beg the Members not to go off half cocked and adopt something that all of us are going to be sorry was adopted.

Certainly, to put the farmers under unemployment compensation would cost a tremendous sum of money, close to 10 percent of payroll. I do not know anything about the situation in Hawaii. Perhaps there is plenty of work there for the farmers the year round. But that is not the testimony before us by all the State agencies. The Interstate Conference, which represents all the administrators of employment security, meets, and they adopt recommendations that Congress should enact and that the States should enact. They testified before our committee and they said that of all the propositions that were before that conference the one which was most certainly adopted was to not put farmworkers under compensation at this time until a further study was made and a sound method had been developed for putting them under it.

What would be done if we put the big farmers under it? Right off the reel, there will be a big scramble such as is going on today for farm labor. Nearly all of our farm labor has moved to industry as it is. What will happen is that there would be four or five big farmers in a little community, perhaps under it, and all the rest of the farmers, the little ones like me, would be out from under it. The little ones will have the toughest problem in the world of getting any part of that farm labor to work for us, because the other boys are going to have unemployment compensation. They are going to flock to the places where, after they work for a series of farmers for 13 weeks—and farming is the most seasonal of all occupations—they can then draw unemployment compensation for 26 weeks.

I want to reiterate again that once a farmer gets under this, under the Senate amendment, every child and every woman that he employs even for 1 day or 1 week, outside of the eight who qualified him, he is certainly going to have to pay for, as the gentleman from Wisconsin (Mr. BYRNES) correctly stated. He will pay a tax on them, but they cannot draw anything unless they work for him and other farmers long enough to qualify, say, for example, for 13 weeks.

The point was made that this is the same as it is in other industries. Certainly it is. But the farming industry is a very seasonal industry, whereas an industrial-type industry is not. People usually do not shut down plants during the course of a year.

But in respect to harvesting, the wheat harvest, the grape harvest, the tobacco harvest or whatever harvest one might have, it is necessary to call in a lot of extra help. They must have them at that time. They may not need them throughout the year, and they do not need them. But they will have to pay a tax on them just the same, and the workers will get no benefit.

Or, if they are able to work for a total of 13 weeks, which would probably take them through that harvest season, then what would happen? They would immediately be out of work and they would draw unemployment compensation for 26 weeks. Then they could rest for 13 weeks more, and that year would be gone. Then probably they can get another job during the harvest season to cover 13 weeks, and you go through the same rigamarole. There are a great many complications, but after we get the information we need it can be worked out. The time is not right now, until we get the benefit of these studies. If you put them under it now, it will just create chaos. The farmers cannot afford to pay the 10 percent. So what are you going to do? You will make tremendous deficit employers out of them, and you will take every little merchant and every manufacturer and everybody else now under unemployment paying taxes and you will have to go back to the States and precipitately raise those rates of unemployment tax on people who are not creating the problem in order to pay for those seasonal workers who as soon as the harvest is over are out of work. Moreover, any State that wants to do it today can do so. They can put farmers under it. But that is different from forcing them under it. The Interstate Conference action shows that none of them wanted it. It has been tried and found wanting and will not work. I say to you it would be a mistake to do it and to run the risk of delaying this conference report when many States today are practically out of unemployment compensation. We do have a triggering device for extended benefits in here that will be badly needed, if it is not needed now, in many instances.

Mr. TUNNEY. Mr. Speaker, I am voting today to recommit H.R. 14705, the unemployment compensation conference report, with instructions to extend coverage to farmworkers.

The unemployment insurance coverage which was proposed to the Congress on July 8, 1969, would affect more farm employers and farmworkers in California than in any other State. Nearly half of the workers who would be covered are employed in California.

Thus I think that it should be of substantial interest to the House that farm employers in California are increasingly in favor of Federal unemployment insurance coverage of farmworkers.

There are a number of reasons for the increasing support for unemployment insurance coverage on the part of California farm employers. An important factor is their concern that they may be placed at an interstate competitive cost disadvantage in selling their produce, if California passes a farm coverage law or if they elect to cover their workers.

Thus, in a statement submitted to the House Ways and Means Committee on behalf of approximately 12,000 citrus and avocado producers in Arizona and California, the executive vice president of the Agriculture Producers Labor Committee stated:

"One argument in favor of extending farm coverage on a national basis is that California's cotton, meat, poultry, cheese, wine, citrus, tomatoes, vegetables and melons must be marketed in competition with the same products from other states; that national coverage will eliminate an element of unfair competition between the states in the marketing of these products."

Also, many California employers have found that unemployment insurance is a highly worthwhile part of their labor-management relations. Hence, some 765 farm employers have voluntarily elected to cover their 18,000 workers. They have found that unemployment insurance stabilizes their labor force and results in reduced costs of recruitment and turnover. In other words, their experience has been similar to that of nonagricultural employers. And, these employers have found that the cost of unemployment insurance coverage for their workers has been moderate. In 1968 the benefit cost rate was only 4.5 percent of taxable wages. They have found that they are better able to compete with nonagricultural employers in attracting workers.

Coverage under unemployment insurance would properly place the cost of fluctuations in farm employment on the unemployment insurance program which was designed for that very purpose. Unfortunately, much of the cost of farm unemployment is now met under the welfare program. I know that the House is deeply bothered by the rapidly rising costs of that program.

A change to farmworker coverage under the unemployment insurance program would place covered farmworkers in a more equitable position vis-a-vis the great majority of other workers, in that entitlement to income during spells of unemployment would be an earned right under an insurance program, rather than a welfare grant based on need.

I urge that H.R. 14705 be amended to provide for coverage of agricultural workers, at least to the extent recommended by the President.

Mr. TALCOTT. Mr. Speaker, my State of California provides more benefits for the farmworker, permanent and migrant, than any other State. Working conditions, living conditions, housing, and wages are better in California than most every other State. Even so all of these factors could be improved—and should be.

There should be a system of unemployment compensation for farmworkers—all farmworkers.

I have introduced legislation to provide benefits for farmworkers throughout the United States comparable to the benefits provided in California.

The gentleman from Michigan (Mr. O'Hara) has made an emotional appeal for unemployment compensation for farmworkers. In the past his recommendations in the farm labor field have prejudiced the farmworker and agriculture in general.

This problem is urgent. Legislation is necessary. But facts are more persuasive than emotional oratory.

California has studied this problem seriously for some time and has not yet devised a satisfactory system. Before we pass a Federal law on this subject, we should know a lot more about the facts.

I therefore oppose any parliamentary motion which on the face appears to benefit farmworkers, but which in fact is ill considered, inadequately studied, and not ready for deliberation by the House.

The chairman, the gentleman from Arkansas (Mr. Mills), and the ranking member, the gentleman from Wisconsin (Mr. Byrnes) have made persuasive arguments for considering the subject of unemployment compensation for farmworkers at a later time to avoid jeopardizing this important bill which is so necessary to so many unemployed workers.

For those who really want to help the unadvantaged farmworker, they can advocate and vote for many other wellknown working benefits—minimum wage, disability insurance, better hours and working conditions—which are wholly inadequate in most States.

The proposal for nationwide unemployment compensation for farmworkers is not ready for passage today. It requires more experience and study—but I hope it will come soon.

Mr. LEGGETT. Mr. Speaker, I have here in my hand a resolution by the Associated Farmers of California, Inc. It says, in part:

"Whereas, farm labor in California falls into two general categories: the permanent worker and the seasonal or migratory worker, and

"Whereas, the former does not need unemployment insurance and the seasonal worker's motivation would be lost with unemployment insurance.

"Now therefore be it resolved that the Associated Farmers of California, Inc. will vigorously oppose in principle any legislation designed to include farm workers under any program of Unemployment Insurance."

I have heard untenable arguments before, but I must say this one wins the mink-lined bathtub.

The farmers say permanent agricultural workers do not need unemployment compensation because their jobs are permanent. Clerks and engineers and civil servants and a lot of other people have "permanent" jobs too, but sometimes they turn out to be not all that permanent. That is what unemployment compensation is for. If we were to follow the Associated Farmers' reasoning, we would have to cancel the entire compensation program for everybody.

The second reason given, that seasonal workers would lose their motivation, is just as ridiculous. The payments will be better than nothing, but they will be small indeed. And they will not continue for more than half a year.

If anyone feels that farmworkers are naturally lazy, that they will work less if unemployment money is available to them—I suggest you try this kind of work for awhile. It is the most grueling, backbreaking work I know of. Whatever else one may say about farmworkers, they are not lazy.

Before I go any further, I do not want to appear to be attacking farmers in general. The Associated Farmers are only one group. Others are more humane and enlightened. The California Farm Bureau in Yolo County, for example, favors a national compulsory unemployment insurance program.

Mr. Speaker, this is something the country needs, and it is a disgrace we did not have it a long time ago. I commend President Nixon and the Labor Department for their stand.

The treatment of farm laborers in this country is something none of us can regard with anything but shame. If there is anyone who was not aware of the inhuman conditions under which farm laborers live and work, Senator Mondale's current hearings should be eye openers.

We all know there is only one reason why farm laborers get the short end time after time: they are not powerful politically. We have kept them uneducated, poor, disorganized, and beat down, and there has not been much they could do to press their case. They cannot throw cocktail parties or contribute to campaigns. Most of them cannot even vote. This is going to change, and as far as I am concerned, the sooner the better.

But right now, we have to give them this unemployment insurance. It will not solve their problems. But it will help. They need it and, as a matter of justice, there is no defensible reason for denying it to them.

The SPEAKER. All time has expired.

Mr. MILLS. Mr. Speaker, I move the previous question on the conference report.

The previous question was ordered.

MOTION TO RECOMMIT OFFERED BY MR. O'HARA

Mr. O'HARA. Mr. Speaker, I offer a motion to recommit.

The SPEAKER. Is the gentleman opposed to the conference report?

Mr. O'HARA. I am, in its present form; Mr. Speaker.

The SPEAKER. The Clerk will report the motion to recommit.

The Clerk read as follows:

"Mr. O'Hara moves to recommit the conference report on the bill H.R. 14700 to the committee of conference on the disagreeing votes of the two Houses with instructions to the managers on the part of the House to agree to Senate Amendment No. 9 extending unemployment compensation to agricultural labor employed by persons who employ eight or more workers during each of 26 or more weeks.'

Mr. MILLS. Mr. Speaker, I move the previous question on the motion to recommit.

The previous question was ordered.

The SPEAKER. The question is on the motion to recommit.

The question was taken; and the Speaker announced that the noes appeared to have it.

Mr. OHara. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The Speaker. Evidently a quorum is not present.

The Doorkeeper will close the doors, the Sergeant at Arms will notify absent Members, and the Clerk will call the roll.

The question was taken; and there were—yeas 170, nays 219, not voting 42, as follows:

[Roll No. 231]

YEAS—170

Adams
Addabbo
Anderson, Calif.
Annunzio
Ashley
Barrett
Bell, Calif.
Bennett
Biaggi
Biester
Bingham
Blatnik
Boland
Bolling
Brademas
Brasco
Brooks
Brown, Calif.
Burton, Calif.
Button
Byrne, Pa.
Carey
Celler
Clark
Clay
Cohelan
Conte
Conyers
Corman
Culver
Daniels, N.J.
de la Garza
Delaney
Dent
Diggs
Dingell
Donohue
Dulski
Dwyer
Eckhardt
Edmondson
Edwards, Calif.
Eilberg
Evans, Colo.
Farbstein
Fascell
Feighan
Flood
Foley
Ford, William D.
Fraser
Friedel
Fulton, Pa.
Fulton, Tenn.
Garmatz
Gaydos
Giaimo
Gibbons
Gonzalez
Green, Pa.
Gude
Halpern
Hamilton
Hanley
Hansen, Idaho
Hansen, Wash.
Harrington
Hathaway
Hawkins
Hays
Hechler, W. Va.
Heckler, Mass.
Helstoski
Hicks
Holifield
Horton
Howard
Hungate
Jacobs
Johnson, Calif.
Karth
Kastenmeier
Kluczynski
Koch
Kyros
Leggett
Long, Md.
Lowenstein
Lujan
McCarthy
McFall
Macdonald, Mass.
Madden
Mathias
Matsunaga
Meeds
Melcher
Meskill
Mikva
Miller, Calif.
Minish
Mink
Mollohan
Monagan
Moorhead
Morgan
Morse
Mosher
Moss
Murphy, Ill.
Nedzi
Nix
Obey
O'Hara
O'Konski
Olsen
O'Neill, Mass.
Patten
Pelly
Pepper
Pettis
Philbin
Pike
Podell
Price, Ill.
Pucinski
Quie
Railsback
Randall
Rees
Reid, N.Y.
Reifel
Reuss
Riegle
Robison
Rodino
Roe
Rooney, N.Y.
Rooney, Pa.
Rosenthal
Roybal
Ruppe
St Germain
Scheuer
Sisk
Smith, Iowa
Staggers
Stanton
Stokes
Sullivan
Symington
Thompson, N.J.
Tiernan
Tunney
Udall
Van Deerlin
Vanik
Vigorito
Waldie
Watkins
Whalen
Wilson, Charles H.
Wolff
Wright
Wyatt
Wydler
Yates
Yatron
Zablocki
Zwach

NAYS—219

Abbitt
Abernethy
Adair
Albert
Alexander
Anderson, Ill.
Andrews, Ala.
Andrews, N. Dak.
Arends
Ashbrook
Aspinall
Ayres
Beall, Md.
Belcher
Berry
Betts
Bevill
Blackburn
Blanton
Boggs
Bow
Bray
Brinkley
Broomfield
Botzman
Brown, Mich.
Brown, Ohio
Broyhill, N.C.
Broyhill, Va.
Buchanan
Burke, Mass.
Burleson, Tex.
Burlison, Mo.
Bush
Byrnes, Wis.
Cabell
Camp
Carter
Casey
Cederberg
Chamberlain
Chappell
Clancy
Clausen, Don H.
Clawson, Del.
Cleveland
Collier
Collins
Colmer
Conable
Corbett
Coughlin
Cowger
Crane
Daniel, Va.
Davis, Wis.
Dellenback
Denney
Dennis
Derwinski
Devine
Dickinson
Downing
Duncan
Edwards, Ala.
Erlenborn
Esch
Eshleman
Evins, Tenn.
Fallon
Findley
Fish
Fisher
Flowers
Flynt
Ford, Gerald R.
Foreman
Fountain
Frelinghuysen
Frey
Fuqua
Galifianakis
Gettys
Goldwater
Goodling
Green, Oreg.
Griffin
Griffiths
Gross
Grover
Gubser
Hagan
Haley
Hall
Hammerschmidt
Harsha
Harvey
Hastings
Hébert
Henderson
Hogan
Hull
Hunt
Hutchinson
Jarman
Johnson, Pa.
Jonas
Jones, Ala.
Jones, N.C.
Kazen
Kee
Keith
Kleppe
Kuykendall
Kyl
Landgrebe
Landrum
Langen
Latta
Lennon
Lloyd
McClory
McCloskey
McClure
McCulloch
McDade
McDonald, Mich.
McEwen
McKneally
McMillan
Mahon
Mann
Marsh
Martin
May
Mayne
Michel
Miller, Ohio
Mills
Minshall
Mize
Mizell
Montgomery
Morton
Myers
Natcher
Nelsen
Nichols
O'Neal, Ga.
Passman
Patman
Perkins
Pirnie
Poage
Poff
Preyer, N.C.
Price, Tex.
Pryor, Ark.
Purcell
Quillen
Reid, Ill.
Rivers
Roberts
Rogers, Fla.
Rostenkowski
Roth
Rousselot
Ruth
Sandman
Satterfield
Saylor
Schadeberg
Scherle
Schmitz
Schneebeli
Schwengel
Scott
Sebelius
Shipley
Shriver
Sikes
Skubitz
Slack
Smith, Calif.
Smith, N.Y.
Snyder
Springer
Stafford
Steed
Steiger, Ariz.
Steiger, Wis.
Stephens
Stubblefield
Taft
Talcott

Taylor
Teague, Calif.
Teague, Tex.
Thompson, Ga.
Thomson, Wis.
Ullman
Vander Jagt
Waggonner
Wampler
Watson
Watts
Whelley
White
Whitehurst
Whitten
Widnall
Wiggins
Williams
Winn
Wold
Wylie
Wyman
Young
Zion

NOT VOTING—42

Anderson, Tenn.
Baring
Brock
Burke, Fla.
Burton, Utah
Caffery
Chisholm
Cramer
Cunningham
Daddario
Davis, Ga.
Dawson
Dorn
Dowdy
Ewards, La.
Gallagher
Gilbert
Gray
Hanna
Hosmer
Ichord
Jones, Tenn.
King
Kirwan
Long, La.
Lukens
MacGregor
Mailliard
Murphy, N.Y.
Ottinger
Pickle
Pollock
Powell
Rarick
Rhodes
Rogers, Colo.
Roudebush
Ryan
Stratton
Stuckey
Weicker
Wilson, Bob

So the motion to recommit was rejected.

The Clerk announced the following pairs:

On this vote:

Mr. Hanna for, with Mr. Long of Louisiana against.
Mr. Ryan for, with Mr. Rarick against.
Mr. Daddario for, with Mr. Pickle against.
Mr. Murphy of New York for, with Mr. Edwards of Louisiana against.
Mr. Gilbert for, with Mr. Dorn against.
Mr. Gallagher for, with Mr. Jones of Tennessee against.
Mr. Gray for, with Mr. Dowdy against.
Mr. Dawson for, with Mr. King against.
Mr. Kirwan for, with Mr. Rhodes against.
Mr. Ottinger for, with Mr. Bob Wilson against.
Mrs. Chisholm for, with Mr. Cunningham against.
Mr. Powell for, with Mr. Burke of Florida against.

Until further notice:

Mr. Anderson of Tennessee with Mr. Brock.
Mr. Ichord with Mr. Burton of Utah.
Mr. Baring with Mr. Cramer.
Mr. Davis of Georgia with Mr. Roudebush.
Mr. Rogers of Colorado with Mr. Hosmer.
Mr. Stuckey with Mr. Mailliard.
Mr. Weicker with Mr. Pollock.
Mr. MacGregor with Mr. Lukens.
Mr. Stratton with Mr. Caffery.

Mr. Hébert changed his vote from "yea" to "nay."

Mr. Lujan changed his vote from "yea" to "nay."

The result of the vote was announced as above recorded.

[Press release]

MONDALE-SAXBE EFFORT TO REJECT THE CONFERENCE REPORT ON H.R. 14705 AND RETURN TO CONFERENCE WITH INSTRUCTIONS

We are requesting that the Senate vote against the Conference Report on H.R. 14705, a bill which extends coverage and improves benefits for some workers under the unemployment compensation system.

We do this *not* because we are opposed to the provisions in the bill. In fact, we support them in these times of economic insecurity and rising unemployment.

We urge rejection of the Conference Report because we think that the provisions adopted by the Senate extending coverage of unemployment compensation to farm employers who have eight or more employees in each of 26 weeks during the year should not have been abandoned in conference.

We think it was most unfortunate that farmworker coverage was dropped in conference. The farmworker coverage adopted by the Senate was a very modest beginning. In fact, only two percent of all farm employees—approximately 22,000—and twenty percent of all farm employees—approximately 250,000—would be affected by this provision. Relatively few and only the larger agriculture businesses would be covered, and not the small family farmer. This does not go as far as the Administration proposal which called for coverage of farm employers who have four or more employees in each of 20 different weeks during the year.

The great majority of the working force is covered by unemployment compensation—over 80 percent of all jobs. Coverage of farmworkers is entirely feasible according to existing studies. Record keeping presents no new obstacle, as the agribusinesses involved are already covered under other federal and state laws requiring records. There is no justification for failing to include farmworkers under the coverage of unemployment compensation.

We therefore urge rejection of the Conference Report. If successful, we will request that a new conference be convened and that the Senate conferees insist on the farmworker provisions adopted by the Senate.

[Excerpts from the Congressional Record, Aug. 4, 1970]

Federal-State Unemployment Compensation Program—Conference Report

Mr. Long. Mr. President, I submit a report of the committee of conference on the disagreeing votes of the two Houses on the amendments of the Senate to the bill—H.R. 14705 to extend and improve the Federal-State unemployment compensation program. I ask unanimous consent for the present consideration of the report.

The Presiding Officer (Mr. Bellmon). The report will be read for the information of the Senate.

The legislative clerk read the report.

(For conference report, see House proceedings of May 5, 1970, H3861, Congressional Record.)

The Presiding Officer. Is there objection to the present consideration of the report?

There being no objection, the Senate proceeded to consider the report.

Mr. Long. Mr. President, I ask for the yeas and nays on the conference report.

The yeas and nays were ordered.

PRIVILEGE OF THE FLOOR

Mr. Long. Mr. President, I ask unanimous consent that Mr. Frank J. Crowley, Education and Public Welfare Division, Legislative Reference Service, Library of Congress, be granted the privileges of the floor during the debate and consideration of the conference report on H.R. 14705, the Employment Security Amendments of 1970.

The Presiding Officer. Without objection, it is so ordered.

Mr. Long. Mr. President, this is the conference report on the Employment Security Amendments of 1970. The bill passed the Senate on April 7, 1970, by a vote of 77 to 0. However, before passing the bill the Senate amended it in 43 respects.

Basically, the bill has three principal features. First, it extends coverage of the unemployment compensation program to more than 4,700,000 additional jobs. Second, it establishes a permanent program of extended benefits for people who exhaust their regular State benefits during periods of high unemployment. And, third, it improves the financing of the unemployment compensation program. In the process, the bill also makes a number of relatively minor changes in administrative aspects of the unemployment compensation system.

While the Senate made a total of 43 changes in the House text, the large majority of these changes were not controversial; rather they were necessitated because of the passage of time since the bill passed the House. Senators will recall that the Tax Reform Act was before the Senate in November of last year when the House acted on this unemployment compensation bill.

I believe it is fair to say that there are only seven significant amendments in the bill—two of these were floor amendments, four were committee amendments and the last one involved a floor modification of a committee amendments and the last one involved a floor modification of a committee amendment. Of these, the Senate receded on four and the House receded on three. Virtually all of the remaining Senate amendments were agreed to by the House.

Agricultural employees: The most important of the Senate amendments would have extended coverage of the unemployment insurance system to large farms, specifically those employing eight or more workers in each of 26 different weeks during the last year. This Senate amendment would have added 275,000 jobs and 23,000 employers to the unemployment compensation program. The Secretary of Labor testified before the committee that this extension of coverage was the most important unresolved issue in the House bill. I was glad the Finance Committee and the Senate were willing to extend the protection of the system to employees of large farms, and I vigorously defended the committee bill on the floor. Unfortunately, we were not able to persuade the House conferees to accept the Senate amendment or any part of it. They advised us that after the most careful deliberation, they had rejected similar amendments in the House Ways and Means Committee and under those circumstances they were not willing to have it now thrust on them as a Senate amendment. On this important question the only concession we were able to obtain from the House conferees was to make the coverage of agricultural workers the top priority in a special study of the unemployment compensation system called for in another provision of the bill.

* * * * * * *

A number of Senators have announced that they will make an effort to defeat the conference report and demand a further conference with the House on the question of coverage of agricultural workers.

This matter had not been dealt with by the House. But Senators will recall, the Finance Committee added amendments to the House-passed version extending the coverage of the unemployment insurance system to employees of large farms—those employing eight or more farmworkers in each of 26 different weeks during the year. In extending this coverage, however, the Finance Committee carved out an exception for farmworkers employed by "crew leaders"—those who shepherd migratory workers from job to job across State lines as the planting and harvesting seasons come and go.

It was the committee's thought that this exception was essential if we were to devise a workable plan for adding agricultural employees to the unemployment compensation program. We were convinced that providing coverage for migratory workers raised problems for which we had no solution at this time. We felt that experience with the coverage of a limited group of regular farmworkers might provide experience that would enable us to work out a plan in the future for bringing migratory workers under the system.

Unfortunately, the Senate was not willing to agree to the committee plan. Rather, it insisted on immediately bringing migratory workers within the farm coverage provision. The senior Senator from Delaware, who is also the ranking minority member of the committee, advised the Senate when it was considering that amendment of the many problems involved. He said it raised problems we could not solve. I, too, advised the Senate that there were problems with respect to the coverage of migratory workers for which we had no answers.

It was not a lack of compassion that prompted the committee to omit the coverage of these workers. It was very practical administrative problems. I predicted at the time the Senate agreed to the migratory worker amendment that we would not be able to solve the problems of the migratory worker in conference. As it turned out, my prediction was true.

As a matter of fact, the addition of the migratory worker amendment in the Senate solidified the opposition to coverage of any farmworkers at this time. The House conferees raised a number of questions about the Senate amendment which we could not answer.

Ever since the Federal-State system of unemployment insurance began, coverage of farmworkers has generally been thought of as a desirable objective. And, every time that farmworker coverage has been proposed, we have been told that the administrative problems are too great and that time is needed for a study of the matter.

In the years that have gone by, some limited coverage of farmworkers has been provided in several jurisdictions and studies of the problems involved in specific States have been undertaken. There has, however, been no study of the nationwide problems involved. In the light of all this, it seemed to the Finance Committee that the best way to secure knowledge of what the problems might be was to attack head on and to provide coverage limited to those farmworkers who most nearly equate with the types of employment that are now covered. In effect, we would have provided a nationwide experiment in farm coverage. This we thought was something that could be done. In this we were more venturesome than our friends on the House Committee on Ways and Means. Acting on the same information that we had, they had decided that even the limited coverage we had proposed in committee was not possible.

In considering farmworker coverage in committee, we had given careful consideration to the special problems presented by migrant farmworkers. We concluded that they should not be covered at this time, and we thought that if migratory farmworker coverage was not provided, the conferees from the Ways and Means Committee might be convinced that they should go along with a proposal for more limited coverage of farmworkers.

As it turned out, the measure that we took to conference included coverage for migratory workers. The inclusion of that provision made our task in conference impossible. However, in the course of the conference, it was also made clear that until a thorough study of the whole farmworker coverage problem was made, no provision for covering farmworkers could be acceptable to the House. We at least were able to get the study started by making specific reference to it in the statute.

In addition to raising these problems, the House conferees were of the opinion that the cost of covering farmworkers would be far greater than we estimated, and that this would involve tremendous subsidization by other employers to pay benefits to farmworkers. They insisted that since they had rejected a farm coverage amendment in the Ways and Means Committee they were not willing to have it thrust on them now as a Senate amendment. And they refused to yield to any degree.

If Senators will look at the good in the conference bill, the improvements that it would make in the unemployment program, I am sure that they will vote for it. The bill extends coverage to a number of groups who are now without protection. It improves the financing of the existing program, and it establishes an extended benefits program for periods when unemployment is high. It seems to me that these are worthwhile improvements which should not be lost in a dispute over a questionable extension of coverage.

But make no mistake about it. If this conference report is not agreed to here today, it will not be agreed to in this Congress. It will be a dead bill. There is virtually no chance that we could get another conference with the House of Representatives. They let a bill comparable to this one die in 1966 because they did not like the Senate amendment.

I would like to have prevailed on the farm coverage amendment—I voted for it in committee. But even without it, I believe this is a good bill. With unemployment continuing to rise, it is more important than ever that we get the extended benefits program enacted into law now so it will not be necessary to pass emergency legislation later on. But that is not all the bill does. It also provides coverage of the unemployment compensation program for an additional 4.7 million people who had not previously been protected, and improves the financial structure of the system. These three factors make this a good bill—one that should be enacted.

I have already noted that there has been no nationwide study of the problems involved in extending unemployment insurance to farmworkers. However, an important regional study of the issue is getting underway at the University of Connecticut. This study will cover the northeastern region of the United States consisting of Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, Pennsylvania, Delaware, Maryland, West Virginia, and Ohio. In the course of the survey farm operators, farm employees, crew leaders, and migrant workers will be interviewed to find out what kind of records employers keep and how much individual employees earn, work and are unemployed. The information is to be collected in such a way that it should be possible to determine whether farm operators keep, or can keep, the kind of records needed for unemployment insurance; the amount of unemployment taxes that would have been collected had farmworkers been covered and how much in benefits would have been paid to unemployed farmworkers, both because of their farmwork and because of any other work that is covered under present law.

While the survey will not cover the entire country, the area selected for the study should give a fair representation of the problems that might be encountered throughout the rest of the country. The area selected for study has a resident farmworker population and is the northern part of the eastern seaboard route followed by about 50,000 migratory farmworkers. In addition several thousand farmworkers from Puerto Rico work in the region and many resident farmworkers work in more than one State. Thus, the area is broadly representative of the national farm population and problems in this area should reflect those that would be found throughout the entire country.

I would expect that the results of this study would be of a great deal of help to us in designing a workable program for covering farmworkers. We have been in touch with the people who are running the study and they tell us that they are generally keeping to their original schedule and that we should begin to get early results of the study around the end of this year. If we wait until this study has been completed before taking action on coverage of farmworkers, we should be in a better position to make sound decisions on how coverage should be extended to farmworkers.

Before concluding my remarks, let me advise the Senate that this farm coverage amendment is not essential to provide unemployment insurance protection for farmworkers. By no means, States are perfectly free to go beyond the Federal law and provide coverage for groups which may not be covered. Many have done so in various respects. So far as agricultural workers are concerned, a few States have extended coverage in limited situations. I urge other States to review their own programs and sympathetically consider amendments to cover farmworkers on a broad a basis as they reasonably can and to do so as swiftly as they see fit. I urge them not to wait for a Federal mandate.

Mr. President, this concludes my explanation of the Senate amendments to H.R. 14705.

* * * * * * *

Mr. Holland. Mr. President, will the Senator yield?

Mr. Long. I yield to the Senator from Florida.

Mr. Holland. Mr. President, I could not be here in the beginning of this discussion today. Did the Senator deal with the amendment which the Senate added on the floor attempting to make the Federal Unemployment Tax Act, applicable to certain groups of agricultural labor?

Mr. Long. Yes, I did discuss that matter. The House was rather adamant on that provision. Since they had considered it and rejected it, they were unwilling to accept it as a Senate amendment.

The best we could get from them was an agreement on a study that would go forward as another provision in the bill. It will be a matter of priority and we will consider farm coverage again after the study is finished.

Mr. Holland. Mr. President, does the Senator mean in this session?

Mr. Long. Mr. President, I cannot assure the Senator that it will be considered again in this session. However, any Senator has a right on a future bill, as the Senator knows, to raise the matter again.

I am frank to say that the House conferees were very firm on this matter. I hardly believe that they will agree to the matter before the study is finished.

Mr. Holland. Mr. President, as I understand the situation, the existing law will continue. Under the existing law, agricultural labor is exempted from coverage under the Federal Unemployment Tax Act.

Mr. Long. That is entirely correct. May I say that I, of course, like to see the Senate position prevail, and I voted for farm coverage in the committee and I voted for the bill.

Also, I believe we should keep in mind that the conference report we have here extends coverage to more people than either the Senate or House bill. To that extent, the bill makes a major contribution so that 20 times as many people will be covered under this bill as would have been affected by the farm coverage provision of the bill.

Mr. Holland. Mr. President, the inclusion of any agricultural labor does not appear in the conference bill.

Mr. Long. No; it does not. The House conferees were very firm on that matter. However, as I say, this bill does provide extended coverage to all unemployed workers covered by unemployment insurance. It provides for up to 13 weeks of additional benefits and adds 4.7 million jobs to those covered under the program.

Mr. HOLLAND. Mr. President, I congratulate the Senator from Louisiana on the outcome of his conference. Frankly, I had felt that the provisions of the Senate bill as applicable to agricultural labor would require further study. I am rather glad that they were eliminated from the bill.

I do congratulate my friend, the Senator from Louisiana, on having gained so many other points and in having made such a clear report on the conference.

Mr. LONG. Mr. President, I thank the Senator.

Mr. President, in that connection, I ask unanimous consent to have printed in the Record a tabulation showing the additional jobs to which coverage is extended. I believe that it makes a very impressive list. There would be 4,753,000 additional jobs covered as a result of this legislation.

There being no objection, the tabulation was ordered to be printed in the Record, as follows:

JOBS ADDED TO UNEMPLOYMENT INSURANCE COVERAGE BY CONFERENCE VERSION OF H.R. 14705—MAY 5, 1970

Category	FUTA	State
Firms with 1 worker in 20 weeks or $1,500 quarterly payroll	2,302,000	1,132,000
Broader definition of "employee"	360,000	210,000
Narrower definition of "agricultural labor"	205,000	190,000
U.S. citizen employed by U.S. employers abroad	160,000	160,000
Nonprofit organizations	0	2,121,000
State hospitals and institutions of higher education	0	940,000
Total	3,027,000	4,753,000

EMPLOYERS ADDED TO UNEMPLOYMENT INSURANCE COVERAGE BY CONFERENCE VERSION OF H.R. 14705

Firms with 1 worker in 20 weeks or $1,500 quarterly payroll	999,000	490,000
Broader definition of "employee"	(1)	(1)
Narrower definition of "agricultural labor"	(2)	(2)
U.S. citizen employed by U.S. employer abroad	(1)	(1)
Nonprofit organizations	0	18,000
State hospitals and institutions of higher education	0	1,000
Total	999,000	509,000

[1] Employers already covered.
[2] Not available.

Mr. WILLIAMS of Delaware. Mr. President, the conference report on H.R. 14705, the Employment Security amendments of 1970, is the best unemployment compensation bill that the House of Representatives and the Senate have been able to agree on after 4 years of disagreement. It contains most of the recommendations made by the present administration and no provisions which they object to. Work on the current bill started in the House last October and in the Senate last March. In this period we were able to overcome the differences which prevented enactment of another unemployment compensation bill in 1966 as well as to iron out the differences which occurred in the course of writing the present legislation.

A number of the differences between the unemployment compensation bills passed by the House and by the Senate were merely technical. There were however, two major differences which I think are worth talking about. One of these is the provision of the House-passed bill which would have extended unemployment compensation to employees of small firms and the other is the provision of the Senate-passed bill which would have extended coverage to people working on large farms.

With regard to the small firm provision the House passed bill would have extended coverage to firms which employed one or more people in 20 weeks a year or which had payrolls of $800 or more in a quarter. Under the present law, coverage is mandatory only for employers of 4 or more people in 20 weeks. This provision was not in the Senate bill and in the conference the will of the House prevailed and the Senate conferees agreed to delete the provision with an amendment increasing the alternate coverage test from $800 a quarter to $1,500 a quarter.

On the other hand, the provision relating to employees of large farms was a Senate provision which we could not get the House to agree to. Quite honestly, I can understand why the House did not go along with the Senate farm coverage provision. Adoption of the provision in the Committee on Finance was a close thing because we had grave doubts that the provision could be administered. We were sympathetic to the problems of farm employees and farm employers but we thought we would not be doing either of them any favor if we provided them with an unworkable system of unemployment insurance. Accordingly, there was a great deal of sentiment in favor of instructing the Department of Labor to make an in depth study of the problems and the costs involved and to report their recommenations to us, as the conference report requires.

My reservations about this provision were strengthened when the Senate adopted an amendment which would have extended farm coverage to migrant workers. When the problem was considered in committee, migrant farmworkers were thought to present a special problem for which there was no clear solution.

The majority of the members of the committee who were in favor of some sort of farm coverage recognized this problem and agreed to exclude migrant workers from coverage. We did not know how the coverage of migrant workers could be administered and the administration could not tell us how it would be administered. Therefore, in committee we thought that experience with a limited provisions might provides clues for broader farm coverage at later time.

When the migrant farm workers amendment was before the Senate I did not argue against it on its merits—I thought a good argument could be made as to its merits. I had to oppose it because it was a problem to which we had no solution. We had no solution in the conference and we have none now.

We did, however, take the Senate passed provision to conference where we were met with very firm resistance. Had we not receded on this point, we could not have reached agreement on any bill. And, the action in the House the other day, where the motion to add the Senate passed provision to the bill failed by a vote of 219 to 270, shows that the House conferees represented the will of the majority of that body.

The House has rejected the farm coverage amendment and their conferees have been discharged. If we were to readopt the provision at this time, the unemployment compensation bill would be dead for this Congress.

I think we would not be wise to kill this bill. Senators will recall that in 1966 an unempoyment compensation bill failed enactment when the House and Senate were unable to agree on what the provisions should be.

The bill before us represents pretty much what was not in dispute in 1966. We should look at the good which the bill would do. I believe that it is a good bill. It would extend coverage to about 4.7 million people who do not now have coverage, it improves the financing of the present program and it creates a program for paying additional benefits when unemployment is high. This new extended benefits program alone might be reason enough to enact the bill now. There are soft spots in our economy and unemployment is rising. In the past when unemployment was high we had to create ad hoc extended benefits programs and they did not get into operation early enough to get the most out of them. Now we have an opportunity to create a permanent program in advance of high unemployment. Hopefully the program will get little use but the fact is that in at least one State unemployment is now high enough so that extended benefits could be paid.

This is our last chance in this Congress to get an unemployment compensation bill passed. The provisions are all a part of the President's legislative program. They are good provisions, they are needed provisions. I hope that we will adopt this conference report.

Mr. MONDALE. Mr. President, I rise to oppose the conference report on H.R. 14705, the Employment Security Amendments of 1970

As chairman of the Migratory Labor Subcommittee, I am pleased that Senator Saxbe, ranking minority member of the subcommittee, as well as most other members of the subcommittee, and other colleagues have joined in requesting that the Senate vote against the conference report on H.R. 14705, a bill which extends coverage and improves benefits for some workers under the unemployment compensation system.

We do this not because we are opposed to the provisions in the bill. In fact, we support them in these times of economic insecurity and rising unemployment.

We urge rejection of the conference report because we think that the provisions adopted by the Senate extending coverage of unemployment compensation to farm employers who have eight or more employees in each of 26 weeks during the year should not have been abandoned in conference.

We think it was most unfortunate that farmworker coverage was dropped in conference. The farmworker coverage adopted by the Senate was a very modest beginning. In fact, only 2 percent of all farm employers—approximately 22,000—and 20 percent of all farm employees—approximately 250,000—would be affected by this provision. Relatively few and only the larger agriculture businesses would be covered, and not the small family farmer. This does not go as far as the administration proposal which called for coverage of farm employers who have four or more employees in each of 20 different weeks during the year.

The great majority of the working force is covered by unemployment compensation—over 80 percent of all jobs. Coverage of farmworkers is entirely feasible according to existing studies. Recordkeeping presents no new obstacle, as the agribusinesses involved are already covered under other Federal and State laws requiring records. There is no justification for failing to include farmworkers under the coverage of unemployment compensation.

We therefore urge rejection of the conference report. If successful, we will request that a new conference be convened and that the Senate conferees insist on the farmworker provisions adopted by the Senate.

I think in many respects the report is sound, and in many respects excellent in terms of extending coverage and expanding benefits. It incorporates principles with which I wholeheartedly agree.

But tragically, and once again, adopting this report we will be repeating what is virtually an ancient and tragic mistake of completely forgetting about the migrant and seasonal farmworkers in America for they have been excluded from coverage. And this omission is despite the fact that the Senate, after substantial and heated debate last April 7, 1970, voted to take the first step in the right direction by including the large corporate farms and the migrant and seasonal farmworkers who are employed on those large farms under this unemployment compensation program.

In our effort to oppose the conference report and send it back with instructions to the conferees to include farmworkers, I am joined by the distinguished Senator from Ohio (Mr. Saxbe), who is the ranking minority member of the Subcommittee on Migratory Labor, the distinguished junior Senator from Pennsylvania (Mr. Schweiker), who is also a member of the Subcommittee on Migratory Labor. and also the distinguished Senator from New Jersey (Mr. Williams), who is Chairman of the Subcommittee on Labor, the senior Senator from New York (Mr. Javits), who is the ranking minority member of the full Committee on Labor and Public Welfare, and I believe there will be others who will publicly wish to join in this effort.

I think I speak for all of them when I say we deeply regret the necessity for this effort to reject the conference report, but we see once again the neglect of the most desperately poor in American life, who probably work as hard and earn as little for their efforts as any people in America. These are the migrant and seasonal farmworkers who are the most desperately poor by practically any standard, including income, health, nutrition, housing, education, and the right to enjoy the political, economic, and social benefits attendant with living in a given geographical area. These people have been chronicled time after time in some of the great literature on American life, beginning with reports as early as 1901. They have been graphically portrayed in novels such as "Grapes of Wrath."

Again their plight was discussed by the Toland committee in the 1940's in the House of Representatives, then again, they are portrayed in a 1951 report in the Truman administration. Moving television documentaries, beginning with "Harvest of Shame" by Edward R. Murrow, and 2 years ago on educational television in "What Harvest for the Reaper" on migrants in the State of New York. Again, a few weeks ago in an NBC documentary "Migrant—An NBC White Paper."

Then a few days ago in a report by a team of noted doctors who had examined the health conditions of migrant farmworkers in Texas and Florida under the auspices of the Field Foundation, which described conditions that are beyond belief.

And all we are proposing to do here is to take the first step to include the farmworker within the unemployment compensation laws of this country, and to include only a small proportion, affecting less than 20 percent of farm labor and 2 percent of our farms—the large corporate growers, to be sure.

Mr. Javits. Mr. President, will the Senator yield?

Mr. Mondale. I yield.

Mr. Javits. Of course. I join, as the Senator said just a few minutes ago, with him and other Senators, but the Senator mentioned percentage figures, and I am sure he will agree that the percentages should relate to the actual numbered figures. As I understand it, 2 percent of the farm employers represents 23,000 employers and 20 percent of the farmworkers represents 276,000 workers.

Mr. President, I ask unanimous consent that a study made by the Department of Labor may be utilized in this respect by being printed in the Record at the conclusion of my remarks.

The Presiding Officer. Without objection, it is so ordered.

(See exhibit 1.)

Mr. Javits. Mr. President, the unemployment insurance conference report before the Senate today discards one of the most important features of the Senate bill—namely, the coverage of agricultural employees—and the Senate must not perpetuate 30 years of injustice to and discrimination against this class of our Nation's labor force by adopting this report.

For years the Nation's agricultural workers have been the victims of this invidious discrimination. Only recently, in 1966, were they brought under the Fair Labor Standards Act and only in 1950 were they brought under social security.

President Nixon in his message to the Congress of July 8, 1969, recommended limited coverage for agricultural workers and Secretary of Labor Shultz vigorously supported coverage of employers having four workers in 20 weeks. The administration thus sought to cover "agricultural businesses"—those large farms employing more than four workers in 20 weeks, in which it was felt that the employment situation was at least as stable as in comparable industries.

Unfortunately the House Ways and Means Committee narrowly defeated a proposal to cover agricultural employers employing eight or more workers in 26 weeks, and the House bill provided no coverage for agricultural workers.

The Senate Finance Committee bill did, however, provide coverage to farmworkers where an employer had eight or more workers in 26 weeks. As the committee report stated on page 12:

"By limiting coverage to agricultural businesses the Committee believes that the cost of extension of coverage will be reasonable and comparable to cost rates of some currently covered industries."

The Senate bill would provide coverage for 2 percent of the farm employers—23,000—having 22 percent of the total farm work force—276,000—and represented a first step in removing this great injustice to a particular class of our Nation's labor force. I am greatly concerned that this Nation spends $3.7 billion per year in farm subsidies for 2.5 million recipients. It is inconceivable that over 13,000 recipients are paid subsidies greater than $20,000 a year and yet these same large agricultural businesses do not provide the most basic protection to their employees in the form of unemployment insurance. In terms of farm employers only, 2 percent of all farm employers would have been covered by the Senate bill.

Mr. President, the will of the Senate was clearly expressed when, by a record vote of 42 to 36, the Senate adopted an amendment offered by the Senator from Minnesota (Mr. Mondale) and cosponsored by the Senator from California (Mr. Murphy) that strengthened the amendments made in the Finance Committee bill. The Senate Finance Committee, in redefining the term "farm employer" used in the Federal Unemployment Tax Act, excluded from that definition the term "crew leaders" and their employees. Thus, the committee exempted from unemployment insurance coverage those agricultural workers who, by virtue of their employer's having eight workers in 26 weeks, would have been covered had they not been working for a "crew leader." The Mondale-Murphy amendment was a modest one and did not extend coverage for agricultural labor beyond that which was intended by the committee bill. The amendment simply recognized and alleviated a potential for abuse by removing the temptation on the part of many employers to appoint a "crew leader" and thereby exempt themselves from the unemployment insurance tax, although they ordinarily would be covered if they employed eight workers in 26 weeks.

The conference committee did not support the Senate position and the conference report, filed May 5, 1970, contains no coverage whatsoever for agricultural labor.

Mr. President, there is no question but that some coverage under the unemployment insurance laws should be extended to farmworkers. Such studies that are available indicate that the benefit cost ratio—benefits as a percent of taxable payroll—for coverage of employees of large agricultural operations would be no more costly than is coverage of other industries.

The benefit-cost rate for calendar year 1967 in California for the canning/processing industry was 10 percent and the rate for contract construction was 3.3 percent. Based upon Labor Department statistics and a special survey conducted in California in 1966, the benefit cost rate for agriculture is 9.5 percent. Under California's elective coverage law, as of December 31, 1968, 765 employers with approximately 18,000 employees had elected coverage and the benefit cost rates for agriculture under elective coverage in 1967 and 1968 were 5.3 and 4.5 percent respectively.

The North Dakota experience involving elective coverage shows similar results with the benefit cost rate comparable to that in other industries. Although the survey was a limited one, four employers with an annual taxable payroll of $10,000 or more had a benefit cost rate of 3.6 percent and the one employer under the North Dakota elective coverage law having eight or more workers in 26 weeks had a 1968 benefit cost rate of 1.7 percent.

In a Connecticut study based upon a special 1960 survey it was estimated that the benefit cost rate for agriculture would be 1 percent as computed with an all industry benefit cost rate of 2.5 percent.

Mandatory coverage for agricultural employers who employed 20 or more workers in 20 weeks was instituted in Hawaii in 1959. In 1968, 35 employers with average monthly employment of 9,815 were covered under the self-financed program—employers pay only for benefits paid which are chargeable to him, rather than contributing to the regular unemployment insurance program—and the benefit cost rate was 1.1 percent. In 1967 the benefit cost rate was also 1.1 percent for these agricultural employers while the benefit cost rate for private industry in Hawaii was 1.6 percent.

Finally, Mr. President, the Canadian experience where agricultural coverage is mandatory, for the fiscal years 1967 through 1969 shows a benefit cost ratio of 1.2 percent for agricultural coverage while the ratio during the same period for construction was 2 percent. The Canadian program covers 35,000 employers and has added 62,000 to the insured work force.

Mr. President, as the chairman of our Finance Committee indicated, this bill represents a long overdue step in reforming the unemployment insurance system. The recent Labor Department unemployment figures and the minority report of the Joint Economic Committee underscore my deep concern for this vital legislation. I strongly support this legislation but I feel that it is inexcusable to provide the reforms in this bill to the majority of the Nation's labor force at the expense of our country's agricultural workers. This is particularly true when the Conference Committee could report back a bill within a matter of hours containing limited coverage for agricultural workers.

Exhibit 1

STATEMENT ON COVERAGE OF LARGE FARM EMPLOYERS

While employees in the agricultural industry should be covered under the same provisions as all other employees, a provision to extend coverage only to large farm employers, including farm labor contractors (crew leaders), is proposed as an initial step.

By beginning coverage in the agricultural sector with large farm employers, the same gradual approach that was used in the nonagricultural sector would be applied. Available information indicates that it would be feasible to start with coverage on the same basis as the present FUTA provision, i.e. employers of 4 or more workers in 20 weeks. Such a provision would affect about 5 percent of all employers of agricultural labor but 30 percent of all the employment under State unemployment insurance laws.

H.R. 14705 includes no provision for the extension of coverage to employees in agriculture. The House Ways and Means Committee did consider defining a large farm employer as one who employed 8 or more workers in 26 weeks. This provision, while more restrictive than the 4 or more workers in 20 weeks provision, would, nevertheless, follow the same gradual approach used in the non-agricultural sector. Such a provision would extend coverage to only about 2 percent of all farm employers and about 20 percent of all the employment under State unemployment insurance laws.

Many persons are employed in both the agricultural and non-agricultural sectors of the work force. In the past ten years over 30% of all hired workers on farms earned part of their wages in non-farm work.

NUMBER OF PERSONS WHO DID ANY FARM WAGE WORK DURING THE YEAR, 1947-68

[Persons 14 years of age and over]

Year	Number			Percent		
	Total	Farmwork only	Farm and nonfarm work	Total	Farmwork only	Farm and nonfarm work
1947	3,394	1,835	1,569	100	54	46
1948	3,752	2,498	1,254	100	67	33
1949	4,140	2,886	1,254	100	70	30
1950	4,342	(1)	(1)	100	(1)	(1)
1951	3,274	2,410	864	100	74	26
1952	2,980	(1)	(1)	100	(1)	(1)
1953	(1)	(1)	(1)	(1)	(1)	(1)
1954	3,009	2,145	864	100	71	29
1955	(1)	(1)	(1)	(1)	(1)	(1)
1956	3,575	2,544	1,031	100	71	29
1957	3,962	2,947	1,015	100	74	26
1958	4,212	2,918	1,294	100	69	31
1959	3,577	2,421	1,156	100	68	32
1960	3,693	2,368	1,325	100	64	36
1961	3,488	2,356	1,132	100	67	33
1962	3,622	2,342	1,280	100	65	35
1963	3,597	2,450	1,147	100	68	32
1964	3,370	2,094	1,276	100	62	38
1965	3,128	1,983	1,145	100	63	37
1966	2,763	1,685	1,078	100	61	39
1967	3,078	2,017	1,061	100	66	34
1968	2,919	1,852	1,067	100	63	37

[1] Information not available.

Source: U.S. Department of Agriculture, Hired Farm Working Force, 1947-68, Sept. 16, 1969.

BENEFIT COST RATES AND AVERAGE TAX RATES FOR SELECTED INDUSTRIES BY STATE (SELECTED YEARS)

State	Benefit cost rate [1] all industries	Average tax rate [2]			Estimated benefit cost rate [3] agriculture
		Construction	Services	Manufacturing	
Arizona	1.3	1.9	1.5	1.4	3.8
California	2.4	3.5	3.0	2.8	[4]9.5
Connecticut	2.5	2.4	1.9	2.1	1.5
Nebraska	.9	2.2	.9	1.1	1.6
New York	2.8	2.8	2.2	2.4	3.3

[1] Benefits paid as a percent of taxable wages. For Arizona, Connecticut, Nebraska, and New York: 1959; California: 1967.

[2] Benefit cost rates not available for these industries in all States listed. Average tax rates are only indicative of long range average costs. Consequently, in any given year the tax rate may be higher or lower than the cost rate for that year. Rates shown are for 1961 for Arizona, Connecticut, Nebraska, and New York and for 1967 for California.

[3] Based on special surveys conducted in the States shown. Arizona, 1959; California, 1965-66; Connecticut, Nebraska, and New York, 1960. Estimated cost rates are for a 12-month period prior to the survey date in Arizona, Connecticut, Nebraska, and New York and for calendar year 1967 for California.

[4] Benefit cost rates for selected industries for calendar year 1967 are: canning and preserving fruits, vegetables, and seafoods, 10 percent; contract construction, 8.3 percent.

FARMWORKERS,[1] NUMBER OF FARM EMPLOYERS: SELECTED YEARS

Item	Workers with stated number of farm employers			
	Total	1	2	3 or more
Number of workers (in thousands):				
1955	1,890	1,600	215	70
1960	1,900	1,610	220	70
1961	1,940	1,630	230	75
1962	1,945	1,625	225	95
1963	1,950	1,620	230	100
1964	1,960	1,620	235	105
Percent of workers:				
1955	100	85	11	4
1960	100	85	12	3
1961	100	84	12	4
1962	100	83	12	5
1963	100	83	12	5
1964	100	82	12	5

[1] Over 80 percent of all agricultural employees work for only 1 employer.

Source: Department of Health, Education, and Welfare, Social Security Administration, Social Security Farm Statistics

EXPERIENCE WITH COVERED EMPLOYMENT IN AGRICULTURE

The research studies summarized on page 23 were based on State surveys of farm workers and employers designed to measure the feasibility and cost of covering all farm employers. Other indicators of the cost of farm worker coverage are available, derived from actual experience. The statement covers the experience of Canada and Hawaii where the coverage is mandatory and of California and North Dakota where farm employers have elected coverage.

CANADA

Item	Fiscal year [1]		
	1967–68	1968–69	Apr. 1–Aug. 31, 1969
Contributions	$2,097,560	$2,339,500	$994,487
Benefits paid	1,940,471	3,467,444	1,121,171
Benefits divided by contributions	0.9	1.5	1.1

[1] The Canadian fiscal year is Apr. 1 through Mar. 31.

For the total period the ratio of benefits to contributions is 1.2 (for the same period there was a 4.4 ratio for forestry and fishing and 2.0 for construction).

Unlike the proposals that have been considered in the United States, Canadian farm worker coverage is subject to no size-of-firm exclusion. Employment is not insurable if performed for a designated relative or if cash wages are less than $9 a week or if the employee or employer's spouse is self-employed in agriculture. Wages paid for the first 24 days of a temporary worker's employment are excluded from taxation and in any case a temporary worker's wages are taxable only if he has earned at least $250. The program, established March 1, 1967, covers 35,000 employers and has added 62,000 to the insured work force. Reported experience indicates that employer records are adequate and contribution delinquency is 10 percent below the average for other employers.

HAWAII

In 1959 mandatory coverage was instituted for agricultural employers who employed 20 workers in 20 weeks. An employed may elect to contribute under the regular unemployment insurance program or may elect to pay only for the benefits paid which are chargeable to him (self-financed). The majority of all employers and employment is covered under the self-financed program. In 1968, 35 employers with average monthly employment of 9,815 were covered under the self-financed program and 12 employers with average monthly employment of 1,106 were covered under the regular program. Benefit costs are not available for employers under the regular program. However, the benefit cost rate (benefits as a percent of taxable payroll) for self-financed agriculture for 1964–1968 is as follows:

HAWAII

Year	Self-financed agriculture	Private industry
1964	1.0	1.6
1965	1.0	1.3
1966	1.0	1.3
1957	1.1	1.6
1968	1.1	([1])

[1] Not available.

NORTH DAKOTA

The following data reflect elective coverage of agricultural employment in North Dakota.

Number of employing units	120
Average employment	148
Unemployment rate	[1] 13.2
Taxable wages (thousands)	$377.3
Contributions	$23,560
Percent of taxable wages	6.3
Benefits charges (thousands)	46.9
Percent of taxable wages	12.4
Average weekly benefit amounts	[1] $34.79
Average weeks of benefits	[1] 14.9
Percent of beneficiaries exhausting benefits	[1] 26.0

[1] Workers earning largest portion of their wage credits in agricultural employment.

A distribution by annual taxable payroll shows that employers with relatively large annual payrolls have relatively low cost rates. For example, 9 employers had an annual taxable payroll of under $500 and a cost rate of 66.6 percent while 4 employers with an annual taxable payroll of $10.000 or more had a cost rate of 3.6 percent. Only one of the employers electing coverge in North Dakota had 8 or more workers in 26 weeks. This employer had a benefit cost rate in 1968 of 1.7 percent.

CALIFORNIA

As of December 31, 1968, 765 employers with approximately 18,000 employees had elected coverage under the provisions of the California law. The following is a distribution of the type of agricultural service or operation in which these employees worked.

CALIFORNIA

Type of service or operation	Number of employers	Approximate number of employees
Overall farming operations	90	3,900
Land leveling	65	372
Planting, raising, and harvesting	36	462
Nurseries	27	183
Crop dusting and fertilizing	57	640
Grain and seed cleaning	2	5
Hay baling	17	64
Irrigation—water companies, etc	102	1,046
Field packing	4	137
Roadsiding	21	88
Livestock and dairying	50	413
Mink raising	1	1
Poultry raising	11	65
Poultry hatching	6	47
Packing shed	139	7,753
Dehydrating	3	106
Truckdrivers	92	1,592
Sheepshearing	24	297
Specialized services	18	1,156
Total, approved applications covering agricultural labor	765	18,284

EFFECTS OF ALTERNATIVE COVERAGE PROVISIONS FOR WORKERS IN AGRICULTURE UNDER THE FEDERAL UNEMPLOYMENT TAX ACT

Size of firm	Estimated number of employers, 1968	Percent of all employers [1]	Estimated annual average employment 1968	Percent of all employment [1]
1 or more at any time	1,300,000	100	1,281,000	100
4 or more in 20 weeks	65,000	5	425,000	33
8 or more in 20 weeks	25,000	2	296,000	23
8 or more in 26 weeks	23,000	2	276,000	22

[1] Rounded to nearest percent.

Source: United States Department of Labor: Bureau of Labor Statistics, Wage and Hour and Public Contracts Divisions, and the Unemployment Insurance Service.

The benefit cost rates for agriculture under elective coverage in 1967 and 1968 were, 5.3 and 4.5 percent respectively.

Other pertinent data of high cost industries in California show the following:

Industry	Average covered employment	Benefits paid per covered Job	Benefit-cost rate
Contract construction	274,971	$436	8.3
Packing, processing, sorting, grading, assembling, preserving and canning of fruits and vegetables (includes canning and preserving of seafoods)	76,955	422	10.8
Total, all industries	4,839,950	95	2.4

Mr. MONDALE. If I may interrupt there, it is the opinion of the counsel of the Migratory Labor Subcommittee that the number of employees estimated to be covered is actually inflated, because the fact is that the statistics are so loose and vague that the employees are not even accurately counted, and that the tests for coverage, almost by definition, will eliminate many. Thus, in addition to the eight employees for 26 weeks test for the farmer, each employee must meet State eligibility standards for experience in the work force, a test which may be particularly difficult for migrant and seasonal farmworkers to meet.

Mr. JAVITS. Is it not a fact that what we have tried to do, and what we will try to do by rejecting the conference report—and I shall vote against it—is to do what has been done in North Dakota, Connecticut, Hawaii, and Canada, and that the cost ratio to benefits as compared to actuarial expenses on the most hard-headed level fully bears out the fact that coverage of farmworkers would be no more burdensome than is coverage of industrial employees. So there is no reason for cutting it out even on the most hard-headed economic terms.

Mr. MONDALE. That is correct. That is why Secretary of Labor Shultz supported the program as well as many of our colleagues from both parties are in favor of it. I am not so sure they are in favor of rejecting the conference report, but they are in favor of the principle of extending coverage.

Mr. JAVITS. I think when a Senator who may be labeled a conservative joins the Senator from Minnesota (Mr. Mondale), who may be classified as a liberal, that indicates the breadth of the support of this principle.

The conference report before us involves a very desirable bill. We are all for it except for this glaring omission.

Does the Senator feel, in good conscience—and I feel that way and I think it is very important that we make it clear—that if we rejected the conference report, for the reasons stated, just as the House often says "No," as it has in this case, the conferees would go back and there would reasonably soon come out of conference at least the minimum position of the Senate?

Mr. MONDALE. Yes. I certainly think so. This is a very modest proposal. It is about half what the President of the United States requested. The unemployment benefits would extend only to farmers having eight workers, for 26 weeks. The President's proposal was for covering farms with four workers for 20 weeks. It is clear that only large farms, and not the small family farmer would be affected by the Senate-passed amendment.

After all, what right do the larger corporations—indeed, I think some of them, such as Coca Cola, would agree—to say that their employees should not be covered by unemployment compensation? I think they would agree that they should be covered. It is far too late in history not to include the major corporate farms within the reach of this program.

I am encouraged into believing that the conferees would agree once the Senate confirmed its commitment to farmworker justice. The trouble has been that migrants have been considered expendable. They have no economic power. Who cares about them? They have no political power. They are the forgotten Americans. So it is the easiest thing in the world to forget about them, to compromise them away, but it is the most tragic situation in America.

I believe the conferees on the House side are as aware as we are of the situation and would help us if they thought we meant business.

Mr. Javits. I agree with the Senator. It is true that they have no vote, and, as the Senator has said, they have no economic power. The crying need itself has really disturbed this country. Millions of people, young and old alike, feel a deep grievance in their own consciences, because of what we know is happening to these workers. That is why "Grapes of Wrath" and all its progency have had such a profound effect on America. That is why, when hearings are held on migratory workers—and the Senator from Minnesota has conducted them—there are headlines which catch our eyes and our ears. This, and the fact that the Senator and other Senators will be voting to turn down a highly expanded program of unemployment compensation, it seems to me, indicates that these people do have an impact and that ultimately we will vote to help them.

Mr. Mondale. I thank the Senator from New York. I yield now to the Senator from Pennsylvania (Mr. Schweiker).

Mr. Schweiker. Mr. President, I am pleased to have joined the Senator from Minnesota, chairman of the Migratory Labor Subcommittee, the Senator from New York, and the Senator from Ohio as a cosponsor of this very important amendment.

As the chairman of the subcommittee has pointed out, it is a very modest beginning. Unfortunately, when one sits day after day through these hearings on the migratory problem, he learns that this modest beginning is a very important start as far as those people are concerned.

One cannot help but be impressed by two factors which have placed migratory workers on the bottom rungs of the ladder of American workers and American economic status. Unfortunately, most of them are not represented in the House or in the Senate because of their migratory status. They have no Representative in the House or Senator to speak out for them, because by the time they harvest one crop, they are not qualified to vote in the elections because of their migratory or transitory working conditions. So they have one strike against them, in that they do not represent a constituency which can appeal to their representatives.

Second, and equally important, our committee made great efforts and great strides in agreeing to a few modest proposals, but, unfortunately, there is an administrative and enforcement problem, and it is a lot like aiming at that proverbial moving target. Every time we get a law on the books, by the time we try to enforce it, the worker is gone, nobody is there, everything is forgotten, because the administrator is not on the scene to enforce it, as is the case with the normal worker, and blow the whistle when employers get off base. By the time he gets off base, the worker is in another State, harvesting some other crop or food.

I think that the conscience of America has got to come to grips with this problem. I commend the conferees for what they have done on this bill. I think, with the exception we are talking about here, that it is a good bill. They have done a lot of work.

I realize there are differences between the House and the Senate, and I realize the other body would have to take some action on this proposal. But, having served in the House of Representatives, let me say that the vote there was the largest, to my knowledge, that the migratory worker has ever received in that body. I think at last the House of Representatives is waking up to the fact that we all have a responsibility. I believe that vote is close, in terms of anything that has been done before, to indicating that that body is aroused about this problem.

So I hope that for once we will look at the problem, not in terms of whom we represent or who our constituents are—because I think on that basis probably no one should support the proposal of the Senator from Minnesota—but I think it is important to all of us that, in taking at least this modest step which represents only the bottom rung of the ladder, we awaken to our responsibilities and support the amendment of the Senator from Minnesota.

Mr. MONDALE. I thank the Senator from Pennsylvania. I would like to say at this point how much I appreciate the efforts and the conscientious involvement of the Senator from Pennsylvania in the work of the Subcommittee on Migratory Labor, because this is a thankless sort of work, often misunderstood, but it is really the only forum in the country before which these poor and disadvantaged people can come to be heard, and it is only because of efforts such as those of the Senator from Pennsylvania, that I think there remains some hope that we might yet make a change in their living and working conditions.

I see in the Chamber the distinguished Senator from Ohio (Mr. SAXBE), who has worked so hard as the ranking minority member of this subcommittee, who sat through almost all the hearings and is as familiar as anyone with the nature of this problem.

I am glad to yield to the Senator from Ohio.

Mr. SAXBE. Mr. President, once again I would like to associate myself with the remarks of the Senator from Minnesota, who has chaired this subcommittee and heard, day after day, of the exploitation of migratory labor.

More than the issue of migratory labor is involved, however. I cannot help feeling that the House would accept a token if this matter went back to them. I do not want to see this provision destroyed. As the Senator from Louisiana and the Senator from Delaware have pointed out, we do not want to lose these gains that have been fought out over the years for the great number of workers who are covered in this bill on which we are now in conference. But I believe it is not unreasonable to think that we can have a beginning of coverage for some of the agricultural workers as well.

These are not small organizations we are dealing with; they are big corporations. As the Senator from Minnesota has pointed out, the Coca-Cola Corp. and others of almost that magnitude are the employers that would be brought under this program, and the relatively small number of agricultural workers certainly are entitled to be included.

One of the areas that I was particularly hopeful about, if we could go ahead with this matter, was that of the crew. If there is one group that is exploited, it is the crew, under the crew leader, of which the estimates run that there are as many as 100,000 crew leaders, perhaps, 10,000 of whom would be significant; but here we are trying to cover only 1,000 crew leaders.

How does the crew system work? The crew leader pulls up on a street corner, let us say in Florida, or perhaps in New Jersey, depending on the crop, or in Michigan or Ohio, and picks up people off the streets. He takes them out where he has a contract with an operator, and they proceed to work, either on a piecework basis, by the pound, by the bushel, or by the box, and then the farm owner or operator pays the crew leader and he, in turn, is the one who has the privity with the worker that he takes out in the mornings. They like to pay them off every night, because it relieves them of responsibility. Yet the individual crew member could work 365 days a year, and have absolutely no coverage and no benefits.

He is exploited in other ways also. He is charged for the ride out in the bus; he is charged for his lunch; he is charged, perhaps, for a bottle of wine. They are exploited from the time they leave until the time they return.

I think it is not unreasonable to believe that the House would recognize this. I believe they want to cover these people. The President, in his message, asked that we cover the farm workers of any operator who has hired more than four workers for more than 20 weeks. We do not even ask that; we say eight workers for 26 weeks.

If we could do this, it would be a beginning toward covering an area that has long needed attention. I think it would solve some of the miseries. We hear a lot about the migration to the cities. We deplore the fact that, as people crowd into our inner cities, there is no work, there is only demeaning welfare, the problems of housing, and all of that. How much better it would be if they could have some type of unemployment compensation. I am not talking about just migrants, I am talking about residents as well. How much better it would be if they had some type of unemployment compensation which would hold them in the rural areas, where they could survive and search for other employment without being forced by economic circumstance into the city, where they create the tremendous, very hostile problems involved in trying to survive in an environment to which they have never become adapted.

So I think that we should reject this report, go back to the House of Representatives, and ask that they reconsider their position. I certainly commend the Senator from Minnesota for his work pertaining to migrants, and also the Senators who sat on the conference committee and salvaged so much that was of value. I regret that they were not able to sell this agricultural provision, but I believe on a second try they could.

Mr. MONDALE. I thank the Senator from Ohio for this very useful observations, and, of course, for being the most loyal and hard working member on the most frustrating efforts of the Subcommittee on Migratory Labor.

He makes two points that I think are important. In the first place, that the farmworkers has been denied for all of these years coverage under most of the modern social and economic legislation that Congress and enacted into law.

For example, in 1970, a State employment security agency will pay a worker who has become unemployed the 50 billionth dollar in unemployment insurance benefits paid since the system was established in 1963. But no farmworker will have received a penny of that $50 billion.

In 1970 alone, employees will receive more than $2 billion in unemployment insurance benefits; but no farm worker will receive a penny of that coverage.

There are some 58 million workers covered by unemployment insurance today, and this conference report will add an additional 4 million, but not a single migrant or seasonal farm workers will yet be covered under this legislation.

We hear the argument that one of the reasons is that we do not know how to cover migratory farm workers, and that more research is needed. But I would remind the Senate, as did the Senator from Ohio, that the President of the United States, Mr. Nixon himself, urged that Congress adopt a more liberal bill, by 50 percent, than the one we are talking about now. The administration urged coverage of farms that had only four or more workers in 20 weeks, and they did not recommend more research.

In a recent leter from Mr. Arnold Weber, Assistant Secretary of Labor, dated May 6, 1970, regarding recently contracted research on coverage of all employees, he said:

"The Department of Labor viewed this resarch project as providing information that would be primarily relevant to extending farm coverage beyond that which President Nixon had proposed to the Congress in July 1969. The issue of large farm coverage was still before the Congress when this project was approved. The Department felt that there was sufficient data available from earlier studies and experience to demonstrate the feasibility of coverage of large farms, and Secretary of Labor Shultz so advised the Senate Committee on Finance in his testimony on February 5, 1970."

In other words, the Secretary of Labor certifies, in this letter, that in his judgment—and his is the Department which must handle this legislation—that they are fully convinced that it is feasible, proper, and wise to proceed with this minimal unemployment compensation coverage proposal.

Mr. President, I ask unanimous consent to have the letter from Mr. Weber printed at this point in the Record.

There being no objection, the letter was ordered to be printed in the Record, as follows:

U.S. DEPARTMENT OF LABOR,
Washington, D.C., May 6, 1970.

Hon. WALTER F. MONDALE,
Chairman, Subcommittee on Migratory Labor,
U.S. Senate, Washington, D.C.

DEAR MR. CHAIRMAN: Mr. Boren Chertkov, Counsel for the Subcommittee on Migratory Labor, asked that we provide you with information on a research project which the Department of Labor has funded, and the relationship of that project to the proposed unemployment insurance coverage of farm workers which was contained in the Senate version of H.R. 14705 and which was supported by the Administration.

The title of the research project is "The Impact of Extending Unemployment Insurance to Agricultural Workers in the Northeastern States." The study is being conducted cooperatively by agricultural economists from Agricultural Experiment Stations in 13 Northeastern States. The total cost of the project is $1,725,000, of which the Agricultural Experiment Stations will contribute $736,000 and the U.S. Department of Labor $989,000.

The project proposal was formally submitted to the Department of Labor on January 13, 1970, by the NE–58 Technical Committee of the Association of Northeast Agricultural Experiment Station Directors. The project was approved by the Department on February 11, 1970.

A sample of farm employers in the 13 States are being surveyed by mail to obtain data on their farm employment and payroll, their farm operations and other data related to the employment practices on their farms. A sample of workers on these farms will be personally interviewed to obtain data on household characteristics, a detailed one year employment history, and other information pertaining to labor force behavior and participation in unemployment compensation programs.

The Department of Labor viewed this research project as providing information that would be primarily relevant to extending farm coverage beyond that which President Nixon had proposed to the Congress in July 1969. The issue of large farm coverage was still before the Congress when this project was approved. The Department felt that there was sufficient data available from earlier studies and experience to demonstrate the feasibility of coverage of large farms, and Secretary of Labor Shultz so advised the Senate Committee on Finance in his testimony on February 5, 1970.

Farms in the Northeast are generally smaller, and few of them would have been affected by the large farm coverage proposals. Thus, the Department felt that the Northeast is a ideal area to study the feasibility of covering middle and smaller size farms and interstate farm workers. We also felt that the information that was developed would help us in preparing for the administration of benefit payments to farm workers, especially interstate workers, if coverage of large farm employers were enacted. (The coverage provisions of H.R. 14705 do not become effective until January 1, 1972.)

I appreciate your interest in this study. We will be happy to furnish you with more detailed information.

Sincerely,

ARNOLD R. WEBER,
Assistant Secretary for Manpower.

Mr. KENNEDY. Mr. President, will the Senator yield?

Mr. MONDALE. I am glad to yield to the Senator from Massachusetts.

Mr. KENNEDY. I want to indicate that I will support the Senator from Minnesota in hoping that the conference report will be rejected.

I should like to review very briefly with the Senator from Minnesota some of the rough statistics, which are only statistics and do not tell the real human dimension of the farm migrant worker problem we have in this Nation.

As I understand, there are approximately 1 million migrant workers in the United States at the present time, and this provision to cover migrant workers in unemployment compensation, which was put in by a rollcall vote in the Senate, would include by rough estimate only about 20 percent of the migrant workers and only about 2 percent of the employers. So it is my understanding that the provision which was adopted by the Senate was really a very modest beginning on what already has manifested itself as being an extraordinarily serious problem in this country.

Mr. MONDALE. The Senator is correct.

Part of the tragedy of the migratory farmworker is that we are not even sure exactly how many there are. Our committee held hearings in which the statistics that are now officially released by the Department of Agriculture on the migratory farmworker were shown to be far from adequate. They admit that they do not have basic data, that they make only spot checks and random samples to accumulate information, and then they extrapolate data from that. They admitted that their own statistics could have wide swings of 20 or 30 percent either way, and even then they are not satisfied. The figures that the Senator from Massachusetts used are the best we have, but we could be off a good deal.

The basic point is that this legislation involves only the large corporate farms, such as Coco-Cola, which was discussed at our recent hearings; and, only a modest proportion of the migrant labor force, perhaps 220,000 or 230,000 at the very most.

Mr. KENNEDY. Furthermore, as I understand it, the fact remains that these migrant workers are not covered at the present time by the minimum wage laws, the child labor laws, the welfare and food distribution programs, the unemployment compensation laws, or workmen's compensation. The thrust of the amendment we added earlier in the Senate would be to begin to include them in this unemployment compensation program, as they should be included, when they have fulfilled the necessary requirements which are as stated by the Senator from Minnesota.

All that the Senate really did at the time it included this was a very modest start, but it was a recognition that migrant workers in the United States live in desperate kinds of conditions and that they should be protected from many of the ravages which they suffer in too many parts of our country.

I think it is extremely revealing that in many of the States, particularly in California, those who have the most direct contact with the entire migrant worker problem, whether they be Democrats or Republicans, are in complete support of inclusion under unemployment compensation. As the Senator from Minnesota knows, from his work as the able chairman of the Subcommittee on Migratory Labor, there have been strong disagreements about how the migrant worker should be treated. But on this question of unemployment compensation I have been deeply impressed by the uniform support that the proposal to include the migrant worker has received. And support has come particularly from those States which have the greatest contact with migrant workers, which know it best and understand it, and which have the greatest sense of appreciation for the human tragedies of individuals who are affected by the extremely difficult and uncertain working conditions which would be partially remedied by the proposed legislation.

Mr. Mondale. The Senator is correct.

I do not happen to knew where many of these officials stand on the question of rejecting the conference report; but on the merits of the issue of extending unemployment compensation in the form we see it here, it is supported by Governor Reagan, Senators Murphy, Javits, Saxbe, and Schweiker, former Secretary of Labor Shultz, the President of the United States, and by Senator Kennedy, Senator Williams of New Jersey, and Senator Mondale. That should include just about everybody, since so many other of my colleagues have expressed sympathy with the hearings and investigations of the Migratory Labor Subcommittee.

There is absolutely no good reason why farmworkers, the most hard-working Americans and the least paid, should continue to be outside the whole framework of social and economic legislation. We have partially extended minimum wage coverage for those on large farms, but it is widely violated, and is still 30¢ below the industrial minimum. We have social security coverage, but because many time farmworkers are paid in cash without receipt, or paid through unscrupulous crew leaders, and so forth, we figure that thousands and thousands of migrants are not being adequately covered under social security because it is not enforced. We have crew leader registration laws that similarly are being either widely ignored or not enforced.

Only 17 States have any workmen's compensation laws which extend to the farmworker, and most all of those provide voluntary coverage only. A few States have extended unemployment insurance, but on a voluntary basis.

Even when it comes to child labor laws, there is special legislation for children in the fields, for it applies only during school hours, so that youngsters of any age can work before and after school, and on weekends and in the summer.

The information we have is that farm work is perhaps as hazardous, if not more hazardous, than any other work. Pesticides, mechanical equipment, truck and tractor accidents, all contribute to the dangerous aspects of farmwork. Yet, there is no occupational hazard legislation at all.

So, time and time again, one thing we can be sure of is that the migrant worker is going to be left out, and he is going to continue to be the most desperately off, pathetic, and disadvantaged person in American life. I think that in decent society this misery and exploitation has to stop somewhere.

We have had unemployment insurance for 36 years, and more than $50 billion has been paid out. 80 percent of the farm work force in this country is now covered, and we want to include about 220,000 farmworkers after all that period, and we are told that we do not know enough about it. I think we know enough to know that we are in the midst of a great national scandal, of a failure of the Nation's coonscience, and I think we have a chance to do something about it today.

Mr. Kennedy. There is very little to add to what the Senator has said so eloquently this afternoon.

I think it might be appropriate to recognize that the average annual income for the migrant worker, as I understand, is $891. They have a life expectancy of some 49 years, which is almost 20 years less than the national average. Their infant mortality rate is about double the national average. The average education completed is less than the seventh grade. Seventy-five percent of their housing is substandard.

These are the rough statistics, as best we can ascertain. The true situation may even be far worse.

I think these statistics support completely the splendid comment of the Senator from Minnesota in talking about the desperate conditions in which these people live. I want to applaud the effort that is being made by the Senator from Minnesota in this endeavor. I support him completely, and I am extremely hopeful that the Senate will follow his recommendation.

Mr. MONDALE. I thank the Senator from Massachusetts.

In light of what has been the continuing and profound interest by the Senator from Massachusetts in this whole problem of disadvantaged, poverty-stricken Americans, he knows full well that no people in America are more disadvantaged than the migrant and seasonal farmworker, and I am proud to have his support in this effort.

I yield to the Senator from Pennsylvania.

Mr. SCHWEIKER. I want to make one point that I believe cannot be emphasized too much in this debate.

I was astounded, after sitting through a number of hearings, to find out that by some quirk of fate, we are actually treating our American citizens who play the role of migratory farm laborers at a lower level of benefits, considerations, and all the other health, welfare, and other considerations which are lacking, worse than a foreign national which we bring into this country to do exactly the same job.

Mr. President, I cannot emphasize this too much, because we are doing this for a specific reason. When a foreign national is to come into this country, the people that are going to use his labor have to sign an agreement with the State and Labor Departments to provide him with certain minimum services and fringe benefits like health conditions, sanitation conditions, living conditions, and minimum pay—and they must pay according to a certain minimum standard, if he is a foreign national. But, if he is an American citizen, and does exactly the same kind of work, he is not covered by that. In fact, we have had witnesses testify before the committee that those who came in from other countries to do similar work to migratory laborers were better treated, had better sanitation, better health, better living and transportation conditions than the American citizen did.

That is a pretty sad state of affairs, in my opinion. When we talk about second-class Americans, the forgotten Americans, and those slogans which may sound trite to us because they are used so often, I do not believe that any other group in that category would be able to show that a foreign national coming into this country to do the same job gets a worse deal or gets any lesser benefits or consideration than the American citizen.

I would just like to make that point.

Mr. MONDALE. I thank the Senator from Pennsylvania very much. One of the most remarkable revelations in our most recent hearings, which underlines the point just made by the Senator from Pennsylvania, was that after the Coca-Cola Co. had acquired a subsidiary named Minute Maid and some years had passed after that acquisition, the president of Coca-Cola sent some of his key personnel to find out how the workers at the subsidiary were living, and how they were being paid.

When reports came back describing minimal living and working conditions, they admitted, and admitted before our committee the other day, that their own workers were treated deplorably, that the working conditions and the pay levels were an utter disgrace. This was the president of the Coca-Cola Co., one of the Nation's largest companies, saying that about his own employees and saying that it was such a disgrace that they had begun a crash program to, in effect, bring those people into the mainstream of American life. I commended this company for their efforts, and their courageous admission that problems exist which must be corrected, and we all look forward to the speedy implementation of their plan for improvements.

But, the imagination boggles at the living and working conditions and standards under which so many of these people have to live, and we have yet to admit to many similar conditions that we must, with a sincere commitment and dedication, eliminate.

Mr. SCHWEIKER. Mr. President, will the Senator from Minnesota yield for a question?

Mr. MONDALE. I yield.

Mr. SCHWEIKER. I should like to ask the Senator from Minnesota if he knows of any other labor group in this country, or workers in any other kind of job, where one can point to a comparison with a foreign national coming to this country, who would get a better deal than the foreign national doing the same job. Does the Senator know of any other situation comparable to that of our migratory workers?

Mr. MONDALE. I know of none at all.

Mr. SCHWEIKER. I think that is a disgrace.

Mr. MONDALE. Maybe the difference is that the foreign national has someone powerful enough to speak up for him; namely, his own government.

But, who speaks for the migratory farmer in this country? Whom does he elect? Who represents him? How does he get the money to send a lobbyist up here?

Where is his economic power, his political clout, or his influence?

The answer is that he is utterly without any power, any influence, or any friends that in any way will form a sufficient majority to even insure such a small pittance as inclusion for a few of their numbers, under our Nation's unemployment compensation system.

That is why we have the sad situation today in which we have a society which has developed so many broad social and worker benefit programs which have left the migratory worker out. He is treated not even as an American citizen. Perhaps all farmworkers might be better advised to move to the British West Indies and then be represented by that government before taking a job in this country. I might qualify that, however, by noting that not even the work contracts covering workers from the British West Indies are adequately enforced, after resulting in situations of near peonage.

Mr. MURPHY. Mr. President, will the Senator from Minnesota yield?

Mr. MONDALE. I yield.

Mr. MURPHY. As my good colleague from Minnesota knows, California has, I guess, probably more migratory workers, or has as many, certainly, as any other State in the Union.

There is no question in my mind as to the propriety of the concept of the Senator's proposal. There are problems. Studies are presently being made. There are difficulties in administration. I know all of this. I have discussed it at length with my good friend Governor Reagan, and he agrees completely with the concept. He points out that studies are being made as to the proper way in which this can be handled and effectively administered.

I feel that, as has been pointed out here, this is a problem which has been much neglected. It will create difficulties, I know, and in some areas will create hardships. But, I believe the time has come when the first step should be taken to solve this problem.

As the Senator from Pennsylvania has pointed out, it is unthinkable that a foreign national could come into this country and receive better treatment than our own American citizens doing the same job the foreign national contemplates. Therefore, I shall support the Senator's proposal and hope that if it accomplishes nothing else, it will bring pressure to bear, so that those who have the responsibility will, at long last, face up to the problems and face up to the conditions.

As my distinguished colleague has heard me say so many times, once we have the commitment made in this country, there is nothing that is not possible. Therefore, in the hope that this will signify the commitment, I shall support the Senator's amendment.

Mr. MONDALE. I thank the Senator from California.

Mr. President, I have been privileged to be a cosponsor with the Senator from California in the amendment which was adopted in the Senate last April to the unemployment insurance bill, but which was lost in conference. I think we stated our case there pretty well.

Now, Mr. President, I should like to conclude by quoting a few paragraphs from the New York Times article about the life of the migrants:

"The young Chicano—or Mexican-American—migrant will move—with his parents through the citrus groves of Florida or California, stoop over the beans and tomatoes in Texas, hoe sugarbeets in western Kansas, crawl through the potato fields of Idaho or Maine and pick cherries in Michigan, moving with the season and the harvest.

"He will sleep, crowded with his family in shells of migrant housing without heat, refrigeration or sanitary facilities. He will splash barefoot through garbage-strewn mud infested with internal parasites and drink polluted water provided in old oil drums.

"By the age of 12 he will have the face of an adult and his shoulders will form in a permanent stoop. He will acquire the rough dry skin and the pipestem arms and legs that indicate a lack of vitamins and proteins. He will be surrounded by children infected with diseases of the intestines, blood, mouth, eyes and ears and thus condemned to poor learning records at school—when they are able to attend school at all.

"Dr. Raymond M. Wheeler, a Southern physician who had served on a team studying health conditions of the migrants, told the Senators: 'The children we saw have no future in our society. Malnutrition since birth has already impaired them physically, mentally and emotionally.' "

I conclude with his question:

"What has to be done to convince the Congress of the United States that the time has come to put aside its greed, its prejudice, its concern for personal power and prestige?"

I know of no group that has been overlooked longer and at a greater cost in human tragedy than the migrant farmworkers of our country.

I hope that today we will agree to include the modest, minimum proposal to extend unemployment insurance compensation to the large corporate farms of this country.

Mr. President, I ask unanimous consent that three recent articles and editorials, which are only a few of many that have recently appeared around the Nation imploring Congress to act, be printed at this point in the Record.

There being no objection, the material was ordered to be printed in the Record, as follows:

[From the New York Times, July 24, 1970]

PEONAGE IN THE FIELDS

Once again the nation's attention has been drawn to the appalling conditions that exist among the nation's most exploited and miserable workers, migratory farm laborers. This time it is a group of physicians who visited these peons in Florida, Texas and Michigan and who have been recounting the horrors they saw to the Senate Subcommittee on Migratory Labor. As medical men, they have been focusing on the sicknesses that plague the workers as a result of their abysmal poverty, poor housing and lack of medical care.

Unfortunately, there is nothing new in this depressing testimony. Since the Industrial Commission reports of 1901, several generations of governmental and private investigators have told and retold this scandalous story of human misery. Yet little has changed over these seventy years, and—if past precedent is any guide—the national conscience will soon relax again.

But precedent need not be followed. The nationwide sympathy that helped win contracts for unionized grape pickers in California showed that gains can be made in today's more sensitive political atmosphere.

The primary need is for Government action to organize the seasonal farm labor market so that it is confined to a limited number of persons who can be assured decent earnings and acceptable conditions of life and work. That is a long-range goal. In the short run, Congress and the state legislatures have the obligation to give farm workers all the protections now taken for granted by other types of labor; generally applicable minimum wages, unemployment insurance, workmen's compensation, etc. For too long this nation has tolerated inexcusable discrimination against its most needy workers. That toleration must end, and soon.

[From the Washington Post, Aug. 2, 1970]

ONE VICTORY AND THE NEED FOR MORE

The struggle has been going on for so long that many supporters of Cesar Chavez, his farm workers and the national grape boycott may feel a little let down now that a settlement in Delano has been reached. But for the workers themselves, those beaten down over the years by poverty wages, by life in shanties and jalopies, and with no way to freedom, the settlement is both a personal and an economic victory.

On the latter score, the United Farm Workers Organizing Committee now has a contract that calls for $1.80 an hour this year, $1.95 in 1971 and $2.05 in 1972, plus other wage benefits. This, of course, is no sudden transfer to life on easy street, but at least the farm workers of Mr. Chavez are no longer at the mercy of the growers; for many of the latter, mercy was a foreign word.

During his weary battle, filled with fasts and marches which were always non-violent, Mr. Chavez was able to attract a wide national coalition. These included the socialites in Southampton and their famous fund-raiser that produced more fun than funds, Robert Kennedy who called Chavez "one of the heroic figures of our time," George Meany, Black Panthers and ordinary consumers for whom passing up the grape counter at the local market was a solid act of union with the oppressed workers. Touched at their cash register nerve, the growers finally yielded.

As Mr. Chavez knows better than anyone, grape growers are only one group of employers. Only last week, the disclosures of the filth and poverty endured by farm workers in the orange groves of Florida showed how desperately a Cesar Chavez is needed there. In the larger political picture, it is an indictment of Congress that a Chavez is needed at all. As the Catholic Bishops Committee has been urging all along in their dispute, farm workers should be protected by the National Labor Relations Act, minimum wage laws and unemployment insurance programs. But no one is out front doing the legislative work for the poverty-crushed field hands.

In the absence of political aid, the same coalition which helped Cesar Chavez in the grape struggle will doubtless be ready to help in the melon, lettuce, carrot or any other boycott that is called for in the effort to bring justic to those who work the field.

[From the New York Times, July 26, 1970]

MIGRANT WORKERS: A LIFE OF BRUTAL HARDSHIP

(By William Robbins)

WASHINGTON.—For a child born with brown skin in one of the southern tier of states, of farm-migrant parents who speak a different language from most Americans, the future is already charted.

The young Chicano—or Mexican-American—migrant will move with his parents through the citrus groves of Florida or California, stoop over the beans and tomatoes in Texas, hoe sugarbeets in western Kansas, crawl through the potato fields of Idaho or Maine and pick cherries in Michigan, moving with the season and the harvests.

He will sleep, crowded with his family in shells of migrant housing without heat, refrigeration or sanitary facilities. He will splash barefoot through garbage-strewn mud infested with internal parasites and drink polluted water provided in old oil drums.

By the age of 12 he will have the face of an adult and his shoulders will form in a permanent stoop. He will acquire the rough dry skin and the pipestem arms and legs that indicate a lack of vitamins and proteins. He will be surrounded by children infected with diseases of the intestines, blood, mouth, eyes and ears and thus condemned to poor learning records at school—when they are able to attend school at all.

That was the picture of the Chicano's life painted at a Senate subcommittee hearing last week. Dr. Raymond M. Wheeler, a Southern physician who had served on a team studying health conditions of the migrants, told the Senators: "The children we saw have no future in our society. Malnutrition since birth has already impaired them physically, mentally and emotionally."

NO REVELATION

For the Subcommittee on Migratory Labor headed by Walter F. Mondale, Democrat of Minnesota, this was no revelation. The subcommittee has been holding hearings into these problems for a decade. But Mr. Wheeler awakened an audience dotted with the brown faces of a few Mexican-American labor leaders by pointing the finger back at Congress.

"What has to be done to convince the Congress of the United States that the time has come to put aside its greed, its prejudice, its concern for personal power and prestige?" he asked.

The case he made was easily documented. Congress, influenced by the senior members from the farm bloc, has specifically excluded migrants and other farm workers from workmen's compensation, while the migrants' accident rate is 300 per cent of the national average. Though the migrants averaged only 78 days of work for pay of $891 last year, they are specifically excluded from coverage by the unemployment compensation law.

Ironically, as if to underscore Dr. Wheeler's charge, the House of Representatives in passing a bill Thursday broadening unemployment benefits, refused once again to include farm workers.

The minimum wage law has been applied by Congress only to the largest farms and the minimum for farm workers has been set at 30 cents an hour below that for other workers. Employers of migrants who pay by piecework avoid even this minimum.

Migrants and other farm workers also are excluded from coverage by the National Labor Relations Act, which protects the rights of other workers to organize in an effort to improve their lot. And the child labor law does not prevent migrant families from taking their children into the fields to help. When no one is able to work, the family rarely qualifies for welfare aid.

The physicians' testimony was based on study of conditions among migrants in counties in Florida, Texas and Michigan. Dr. Gordon Harper, who visited camps in Michigan, concluded his testimony with an impassioned indictment: "If the only way to insure simple dignity, self-respect and health for our brothers is to wait until they can buy their way into a place in our national sun, that is a terribly sad commentary on the moral economy of our country."

The migrant laborers' life expectancy is 49. Their infant and maternal mortality is 125 per cent of the national average. Their death rates from influenza and pneumonia are 200 per cent—and from tuberculosis 250 per cent—of the national rate. Their wages are too low to cover medical care, while the $15 million that Congress voted for the Migrant Health Act last year is being largely absorbed in the local machinery of the Public Health Service.

The reasons that little has been done for the migrant farmer are not hard to see. The 257,000 migrants are not anybody's electorate. At election time, they are rarely in a place where they can vote. And even in areas where they are most numerous they are a despised minority.

The Senators on the subcommittee accepted the justice of Dr. Wheeler's charge against Congress. "I would like to come away from this hearing with the hope that something is going to happen," Senator Mondale said. "The truth is we have heard all this before."

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Mr. Holland. Mr. President, several proposals have been advanced here which are not in accord with the facts as I know them. I do not mean that they have been deliberately misstated. But I do want the record to show the true facts as I know them.

First, I have heard the statement made repeatedly that the Senate bill would simply extend unemployment compensation coverage to the large corporate farms. That may be true in some States. That is not true at all in my State. There are literally hundreds of farmers in my State who are not large corporate farmers. but who do employ the eight workers for the period of 26 weeks or more and who would be covered by the Senate bill. They are no more corporate farmers than are the Senators who are so ardently speaking for the rejection of the conference report.

My two closest neighbors in my hometown of Bartow, Fla., happen to be in that classification. Each of them has more than eight employees who are regular employees on their farms. They are not corporate farmers. They are not even very large farmers by any description that could be given.

I do not think there would have been much trouble with reference to the approval of the Senate committee bill which applied to farmers from that size up, and a great many of them were not corporate farmers.

The trouble in connection with this matter comes from the amendment pressed by the Senator from Minnesota and others which would have included migratory workers within the coverage of this unemployment compensation matter.

Let us state the situation clearly. This means that if I as a farmer were to have an orange grove big enough or an orange grove and a vegetable farm big enough to have eight employees for half a year and needed 50 or 75 or 100 harvesting employees for a period of weeks or months or for varying periods to harvest the crop, but none of them for the long period mentioned by the bill, and if I found it impossible to retain the same harvest hands day after day, but to the contrary had to go to wherever I could to get them—and that happens to be one of the facts of life insofar as the harvesting of our highly perishable crops in Florida are concerned—no telling how many employees we would have had that were migrants. No telling how short a time or how long a time they would have worked. No telling how long a time they would have been in my State working. They might have been there a few days. They might have been there a few weeks. They might have been there a couple of months.

They would then go up into Georgia and South Carolina for the peach crop. They would then go on up in the country, many of them landing in New York or Vermont for the apple harvest or over in Michigan for the cherry picking or in other parts of the country. They move about in such a way as to make the time that they spend in any one place rather small and the keeping of the books and records becomes a rather difficult thing and the combining of these work records an almost impossible thing because of the fact that those migrants worked in so many States and in so many crops and in so many places.

The vice of the bill that passed the Senate on this matter was entirely occasioned by the amendment offered by the Senator from Minnesota, and others, which brought within the purview of the provision of the Senate committee bill the migrant worker. They present a completely different problem from the problem of the eight workers who work for half a year on one farm; they work on literally hundreds of farms and groves.

Maybe the problem in my State is not like that in many other places. However, as the Senator knows, most of our crops are perishable crops. Most of our crops do require the harvesting costs to be much larger than any other kind of cultivation, pruning, fertilization, or other work done in the rest of the year or, for that matter, all of the year.

We have this problem and it makes the bill in the final form in which it passed the Senate objectionable to our people.

My friend the Senator from Minnesota has frequentlly mentioned Coca-Cola. May I say that Coca-Cola is not typical at all of the average farmers in my State who would be covered by the bill as it finally passed the Senate.

Hundreds and hundreds of good people who support our State and are there a year or more and who do have eight or more permanent workers have this harvest problem. They have to hire migratory workers who, unfortunately, are not regular employees. They will work for one man and will then work for another man. They will work in one community this week and move to another community next week, particularly in the vegetable industry. Usually they will work from day to day for different farmers. If anyone were present, for example, in the town of Belle Glade, in the heart of the vegetable area of Florida, they would find trucks recruiting workers each morning. The workers would pick one truck today, another truck the next day, a third truck the third day, and so on.

Of course, they take considerable time to go fishing in the Florida canals, which is fine. I want them to have some of the privileges of Florida life just as it is. They are better conditioned.

We know that this migratory worker problem is a serious one. We have been trying to solve it for a very long time. I have heard the Senator from New Jersey (Mr. Williams), who I think has been the most dedicated worker for the migrant worker in the Senate, say on several occasions he found better conditions in Florida in dealing with this situation than he found anywhere else. I heard him say, for instance, that the day-care schools for children of migrants were established first in Palm Beach County, in my State, and had become a regular fixture in many of the vegetable-producing areas of the State.

I heard him say they had hospitalization provided in the vegetable area of Florida, which was the best he found anywhere in any of the States that have this migrant problem to deal with.

I heard him say that so far as education of migrant workers was concerned the best situation he found anywhere was in the area around Homestead, Fla., where there is so much production of vegetables and other perishable crops.

I heard so much about the good things that have been done in Florida. I have heard so much about the high wage scale that prevails there, and it has to because it has to compete with the hotel business, which is in operation at the same time of the year, and to compete with highly paid industries such as the space industry and defense industries which make up such a large part of our industrial life, and the phosphate industry which is so highly organized and has such highly paid workers. So the rate of pay has to be high. Therefore, I am amazed that my friends want to pick out the exceptional things and nontypical things which are picked out by those who produce documentary films of the things typical of the farming situation in my State.

On behalf of my State I wish to say that the two documentary films that have been mentioned relating to Florida, the Merrill film, and the other of 2 or 3 weeks ago by NBC, do not show the typical situation in Florida, and as stated by the Senator from New Jersey (Mr. Williams), do not paint the typical situation. I regret they do not do so.

I heard my friend, the Senator from Pennsylvania, say something awhile ago which was not directed at Florida but that might have been, in that he said laborers coming in from outside our Nation are paid more than those from inside our Nation who do exactly the same work. I do not know what my friend was referring to, but I can refer to two situations which I happen to know a little about, where the facts are as follows:

We are allowed by the Department of Labor and the Department of Agriculture to bring into Florida about 9,000 cane cutters each year. The only reason we are allowed to do that is because cane cutters cannot be found in the United States who are willing to do that work. What is that work? It is work on one's knees in the muck, cutting the stalks of cane by hand with machetes. It is very, very hard work; it is very disagreeable work. Secretary of Labor Wirtz told us several years ago it would be impossible to find domestic workers. He went over to the State so ably represented by the chairman of the Committee on Finance (Mr. Long), and found 70 of them and brought them back to Florida to cut cane.

When they looked at what had to be done in Florida, where we grow our cane in the muck, they said, "This is not what we call cutting cane. We call cutting cane going along after the machine on harder soil in Louisiana"—which is harder soil than muck—"and we can't attempt this work." The majority of them never went into the fields at all. They went back to Louisiana or somewhere, all at the expense of the growers and they refused to go into the fields. Some of them did go into the fields but in 10 days they had all left except one and he was in the hospital because he cut himself with a machete. He was in the hospital for a good many weeks at the expense of the grower.

It was only then that Mr. Wirtz said: "I admit we cannot find workers in America to cut cane in the Florida cane fields."

What are the facts? In the first place, one cannot find American workers to do it so it cannot be said that those who are brought in are paid more than American workers to do the same work. There are no American workers to do that work. In the second place, the minimum pay is fixed by the Secretary of Agriculture and it is $1.65 per hour so far as our State is concerned. It was that amount last year and it will probably be more next year; but that is a minimum wage.

The work is piecework. The average pay, I am told, in all sectors of the sugar industry is about $2 an hour for these something like 9,000 workers who come in. From where do they come? They come from Jamaica, Barbados, Trinidad, and some of the smaller islands in the Caribbean. So there is no problem concerning what they receive compared with similar American workers because there are no similar American workers who will do that work.

The second group that I know about are the Basque sheepherders. I inquired about the number of those people brought in to herd sheep. I have inquired several times. The last time I inquired there were 1,700 of them. They are in the arid areas of the West. The Secretary of Agriculture allows them to be brought in for a period of years. They are required to be paid rather good pay. My recollection is they receive $200 per month and up. The reason they are brought in is, again, Americans cannot be found who are willing to keep the sheep, go through those arid areas, and sleep with the sheep in corrals where sheep have to be kept at night. Americans will not do that work so there can be no comparison between the pay of these Basque sheepherders and the amount paid Americans doing the work because few Americans will do that work.

I am told there are some Latin Americans in the southwestern part of our country who will do that work and they are required to be paid at the same rate. Everyone wants to be fair about this matter.

It is hard for one who has lived all his life in the area and who knows something about the situation there to preserve his temper here when statements are made with reference to conditions which are not typical of what prevails. The statements are made by highly reputable Senators, in good conscience, trying to do the right thing. But I do want to say it is not fair and it is not right to pass the bill in the shape it passed the Senate after the amendment was added whereby a farmer—not a big, corporate farmer but an ordinary farmer—who had to have eight workers to maintain his grove or farm, would be responsible for unemployment insurance for those migrant workers who picked the crops. They all prefer local people but there are not enough of them. We have to bring in a great many workers to do the harvest work.

They are not stable workers. Many of them do not stay on any job for any fixed period of time. By the very nature of their work, they do not stay in our State for any long period of time, because they go up and down the country to harvest the perishable crops.

If there is any reasonable way to include them within the coverage of such an act as this, I do not see what it could possibly be.

I want us to be fair to them. I have insisted, with my growers, year after year, that they improve situations in Florida, and they have done so. I have insisted on better housing. Our legislature passed a housing act which was commended here on the floor by the Senator from New Jersey (Mr. Williams). My legislature has passed health acts which apply to migrants, which have been approved here on this floor. We are always trying to get a better and more uniform handling of the situation. It is being handled decently and properly and in a Christian way by the great majority of our growers. It is being handled inhumanely and improperly, and I think viciously, by some growers. We are attempting to improve that condition every year, and we are doing so.

Now to try to bring about this kind of result by imposing Federal law on unemployment insurance provision that covers not only regular members but those who come for a few days during the harvesting season, and do not even stay in one place permanently during that particular harvesting season, but who travel from place to place within one State, is not a reasonable way to handle this problem. I think there are ways to handle it. I think migrant workers can be given permanent legislation that will better take care of them. But I see no reason at all why it was sound judgment for the Senate to adopt the amendment here that put migrants, uncontrollable as they are as to their time and as to their work, in the same classification with the permanent workers who do abide on the property and who are entitled to have the protection.

It happened that when I was Governor of our State we passed and I signed into law, a bill giving workmen's compensation to those permanent workers who worked in the packinghouses, the concentrate plants, and other places where the preparation of the crop moves forward. We have not found any way yet, in our State at least, to deal as fairly as that with the migrant workers, though we have tried to take care of them under decent housing laws, under decent health laws, under decent education laws, and, of course, under pay rates that enable them to make excellent pay if they just want to work and earn it and make it.

Mr. President, I commend the distinguished Senator from Louisiana and the other Senators who are with him on the Finance Committee for the kind of bill they brought out of the committee. I wish it had been the provision of that bill that passed on the subject. I wish the amendment offered here by the Senator from Minnesota, bringing the migrants under the provisions of that bill, had not been adopted. I think there would have been no trouble at all if it had not been added on the floor.

I hope that the conference report will be approved. It has great merit in it. It extends coverage, as the Senator from Louisiana has accurately stated, and as the Senator from Delaware has accurately stated, to a greater number than were covered even under the original Senate committee bill. I congratulate them upon the good work they have done. But I do not think we should send this bill back to conference with the hope of this wrong thing being done—and it would be wrong to try to add the migrants.

There are other ways to handle the problem. I stand ready to help in reaching those ways. But I am not at all ready to include the migrant workers under this unemployment compensation act. The defeat of the provision is due to the inclusion of that unwise amendment, because I am very sure that the work of the committee would have prevailed but for the inclusion of that unwise amendment.

The committee reported a provision that made the unemployment compensation applicable where there were eight workers or more, for 26 weeks during the year; and I do not think anybody would protest at all against that. That certainly did not apply only to large corporate farms. It applied in our State to dozens or more of independent farmers, orchardists, vegetable producers and to the eight stable and permanently located and good, serving, and honorable workers, in their fields or in their groves.

I hope the conference report will be adopted. I apologize to the Senator for taking so much time. I am trying to uphold his position, because I think he has a good conference bill and I think the Senate should approve it.

Mr. LONG. Mr. President, I shall be very brief about this matter. Four years ago the Senate went to conference with the House of Representatives on a bill of about this magnitude. It involved approximately 60 million workers, and would have extended benefits for an additional 13 weeks during times of recession. That bill died in Congress because there were certain minimal Federal standards which the Senate was willing to accept, and although many States met those standards, organized labor and the administration were so determined to apply some minimal Federal standards as a starting point that they were willing to have that bill defeated rather than accept what had been done in conference. The House was adamant.

We were quarreling about something that involved about 1 percent of what was in the bill. It was, nevertheless, an issue that defeated a bill that was in the interest of the working people of the country and that should have become law.

We face a similar situation today. We have passed a bill that is of benefit, potentially, to 61 million working men, women, and their families. The bill that was reported back brings into coverage about 4.7 million additional jobs, comprising perhaps 80 percent of all the additional jobs which could be covered.

So we are urged to reject the conference report really because we are not able to extend the benefits of this bill to about 250,000 farm and migratory workers, for whom the Senator from Minnesota has expressed concern.

Mr. President, I admire the Senator for his concern about this number of people. But it should be remembered that there are more than 300 times as many workers who would be favorably affected by the passage of this bill as there are for whom the Senator would speak today. It is for those workers that this bill would provide extended benefits with coverage for the first time, to whom coverage would be denied if this bill should fail.

Mr. President, in my judgment the bill would fail, just as a similar bill failed 4 years ago, if this conference report were not agreed to. That would seem very sad to this Senator, to see this bill fail to benefit 61 millon people because we were not able to extend the benefits of the bill to cover about 250,000 more.

Mr. President, I know how determined the members of the House Ways and Means Committee are on this issue. They have prevailed on a rollcall vote by a vote of about 219 to 170, and the leaders of that fight on the House floor were the same conferees we had to negotiate with. They are not going to yield on this issue; if the Senate votes the bill down, I say there is every possibility of a repetition of what happened 4 years ago, and 61 million people whose families would otherwise benefit must suffer because we have been unable to benefit 250,000 more. When we are benefiting 61 million workers, I think it would be extremely unfortunate if, in trying to get everything the Senate has sought to do, we failed to get any of it.

That being the case, I think the Senate would certainly want to agree to this conference report.

I would point out that this is not the only provision we have available to us to help these migrant workers. The House of Representatives has indicated that it is willing to help them, under the public welfare system, by passing the family assistance plan we are presently considering in the Senate Finance Committee.

I know of no Senator more willing than I to help people who are willing to work; and that certainly describes the people the Senator from Minnesota would like to assist. In so far as the Senator is correct in saying that the average income of those families is about $890 a year, that family assistance bill could increase the Federal assistance, in cash alone, for such persons to about $1,600 per family. And no Senator who wants to do so would be prevented from offering an amendment, either in the committee or on the floor, to extend food stamps to those people, thereby perhaps increasing their income four-fold, as compared to the figures quoted by the Senator from Minnesota here today.

Furthermore, Mr. President, there is nothing to prevent a State from passing laws to benefit the people that the Senator from Minnesota wishes to help, and some States have. I would urge others to do the same.

If this conference report is not agreed to, we would be performing a disservice to 61 million workers in this country who would potentially benefit from the bill before us. Therefore I very much hope that the conference report will be agreed to.

Mr. Dole. Mr. President, in 1935, Congress passed the unemployment compensation program as part of the Social Security Act. The purpose of this legislation was to provide a temporary source of income for millions of individuals who had suddenly found themselves out of work. This system was not devised as a handout; but as a means to enable millions of Americans to withstand economic hardship by providing compensation already rightfully earned.

On July 19, 1969, President Nixon, recognizing unemployment compensation's inherent worth, proposed to Congress a bill which would expand its benefits and strengthen its framework.

In his message, the President stated that the purposes of the proposed legislation were "to extend unemployment insurance to 4,800,000 workers not now covered; to end the shortsighted restrictions that stand in the way of needed retraining efforts; and to add a Federal program automatically extending the duration of benefits in periods of high unemployment." Furthermore, he stated:

"In human terms, the recommended changes will enable a worker to weather the adversity of unemployment and to find a suitable job."

The conference report on H.R. 14705 is the congressional response to the administration's proposals. Several changes have been made in the original proposal.

The conference report increases coverage of State and Federal unemployment compensation by 4,750,000 jobs, the biggest single improvement in coverage since the system began in 1935. Of the 4.75 million new jobs proposed to be covered: 1,130,000 are in small business; 210,000 are traveling and city salesmen, and agent commission drivers engaged in the distribution of certain products; 190,000 are in agricultural processing; 160,000 are held by U.S. citizens working for American employers overseas; 2,121,000 are in nonprofit organizations, excluding church-operated organizations, and schools other than a school of higher education; and 940,000 are in State hospitals and institutions of higher education.

Mr. President, there are some who argue that these provisions go too far and others who argue that they do not go far enough.

More specifically, there are those who urge the defeat of this important conference report because it excludes coverage for 250,000 farm employees. Delay and disagreement over this one provision might well endanger the entire bill as in 1966 when similar legislation died in conference for lack of agreement. Sending this bill back to conference may mean that we will have to wait another 5 years to vote on these innovative features.

An important provision of this bill is the extension of the Federal-State unemployment compensation program. Twice, in 1958 and 1961, Congress enacted laws that extended unemployment compensation on a temporary basis during an existing recession. This method of providing unemployment aid during national recessions helped offset the effects of prolonged unemployment, but it provided relief only on a piecemeal approach.

To remedy this deficiency, the President requested that the individual States or the Nation as a whole automatically be eligible for additional unemployment compensation after the exhaustion of regular benefits during periods of high economic unemployment. H.R. 14705 calls for two indexes to trigger the benefits. Nationally, there would be an "on" indicator when unemployment equaled or exceeded 4.5 percent for the three most recent calendar months and a national "off" indicator when unemployment remained below 4.5 percent for each of 3 consecutive months. The State indicator would be "on" for any individual State when, for 13 consecutive weeks, the unemployment rate in the State is 20 percent higher than the corresponding period of the 2 preceding calendar years, provided that the current rate equaled or exceeded 4 percent of covered employment. The State extended benefit period would end when either of these conditions were not met.

The amount of extended compensation a State would be required to pay would be 50 percent of the total regular compensation including dependent's allowances, payable to an established limit. This 50 percent is payable on a 50–50 matching basis with the Federal Government.

Had this legislation been in effect over the past 12 years, the national "on" indicator would have been activated for three periods—1958–59, 1960–62, and 1963, covering a total of 41 months, and extended national benefits would have been available.

In my home State of Kansas, during the years 1958, 1960, and 1961, the State "on" indicator would have applied extended State benefits over a period of 12 months.

Extended benefits would now be available in 10 States if the present bill were now in effect, and if those States had passed legislation providing for participation in the extended program.

When President Nixon introduced this legislation, he stated:

If the economy were too slow and employment were to rise, this program automatically would act to sustain personal income. This would help prevent a downturn from gathering momentum resulting from declines in purchasing power.

The President introduced this legislation during a period of low unemployment and urged its passage. Now, in a period of higher national unemployment and much severe local and regional unemployment, the case for swift approval of this legislation is clear and convincing. Mr. President, I urge approval of the conference report.

Mr. BENNETT. Mr. President, migrant farm work is like no other work in the world. It is a job here today, and maybe a job there tomorrow. Migrant farm workers never really become a part of the labor force; at best, they are seasonal workers everywhere they go. They are not hired by farm operators to do specific jobs; rather, they are assigned to jobs by crew leaders. The migrant farm worker leaves his work because the crew leader tells him the job is over. He does not look for work; his crew leader looks for work. On any job, he does not know who his legal employer is. Under these circumstances it would be difficult, and perhaps impossible, for unemployment insurance administrators to determine when the migrant was unemployed, when he was available and willing to work, and the circumstance of his leaving his last job.

A migrant worker will work in several States, for perhaps dozens of employers. In each case, he may work 1 or 2 days for an employer and be unemployed for 1, 2, or 3 days. Is he going to be able to claim total or partial unemployment for a rainy day or a rainy week? And if he does, how do you determine when he is available for work and the circumstance under which he left his last job? It seems clear that whatever the worker said, it would be more practical for an employer to show that he was unemployed through his own fault, or that he is not available for work and should not be paid unemployment benefits. This would be in the employer's interest because of the effect benefit payments could have on his experience-rate taxes.

There is always a serious question as to the identity of the employer of a migrant worker. In some cases, the crew leader is really the employer; in others, the farm operator is. But in all cases, there is a reasonable question as to who the employer is. Under social security, this is determined by references to a single Federal law, but under unemployment insurance this would be determined under the laws of the various States. In one State, the employer might be the crew leader—but in an identical situation in the next State, it might be the farm operator. Thus, the legitimate question of who would pay the unemployment taxes, which the committee provision would have avoided, was raised when the floor amendment was adopted. If you are unable to identify the employer under State law, or if there is litigation, the migrant worker would have no effective coverage, regardless of a Federal law saying that he is covered.

You can be sure of one thing about this kind of situation: the crew leader is going to insist that the farm operator is the employer, and the farm operator is going to insist that the crew leader is the employer, because neither one of them is going to want to pay the tax. I might add that the poor migrant worker is not likely to know which one of them was his employer because the question really turns on local law. In either event, the House conferees pointed out that the Senate-passed farm coverage amendment would start off by breeding needless litigation. And the House conferees were not willing to become party to barratry by legislation.

There were also questions as to how the seasonal employment provisions of State laws would apply to migrant workers. In some States, workers engaged in seasonal industries cannot qualify for unemployment benefits outside their regular working season. In other States, there are no such restrictions. Thus, for the migrant worker who works in several States—States with and without seasonal restrictions—it might be necessary to combine his earnings in all States in order to determine the benefits payable for a specific week. For the next week, however, only those earnings in one or two States might be used. Thus, unemployment insurance benefits might have to be revised from week to week because the season in one State might end while the season in another State would start.

We were also faced with the question of how the migrant farmworker would know who his employers had been when it came time for him to claim benefits.

When the migrant worker is employed by the farm operator, rather than a crew leader, he may work for a different employer on each day of the week; and in order to claim benefits, he will have to tell the employment office where he files a claim and who he has worked for throughout the entire year. This would be a tremendous task for an educated man who can read, write, and keep records; but for the uneducated semi-literate—and sometimes non-English speaking migrant worker—it would be an impossible task. Moreover, the farm operator would know the near impossibility of a worker ever identifying him and would tend to avoid paying unemployment taxes. Thus, the coverage of migrant workers who are employed by farm operators would probably be a meaningless gesture until such time as administrative techniques are developed for dealing with this problem.

Moreover, when a migatory worker hires himself out directly to a farm operator there is a question of whether he is truly an employee, or an independent contractor. If he is the former, the unemployment tax could apply. If he is the latter, it would not apply; and I must say that when a farmer engages a migrant worker with instructions "to pick all the beans in the field" there is a serious doubt that he is truly an employee.

Then, too, when the migrant family works, there is a question as to who is the employee.

In a lot of cases, it is not a migrant worker alone who does the farmwork. It is the migrant's family: his wife, his older children, and even his 5-, 6-, and 7-year-old children in some cases. The individual family members, however, may not be paid as individuals on the basis of the amount of work done, but the head of the family may be paid for everything done by the family. Under the unemployment compensation laws, the family earnings are not his earnings, and whatever is reported for him might have to be investigated to see how much was earned by him, by his wife, and each of the children. Of course, if each member of the family does enough work to qualify for unemployment compensation, each might be able to qualify for unemployment benefits. However, it would be nearly impossible to determine who earned how much and from whom.

The information presented to the Senate by those who oppose the conference report did not come to grips with these problems, but carefully avoided them. The Senate conferees, however, could not ignore these considerations and even had they been so disposed, the House conferees made certain that the issues were fresh and sharp in the minds of the Senate conferees.

I would have preferred to have salvaged some part of the farmworker coverage amendment, but the House would not yield even one little bit on this issue. We were faced with a take-it-or-leave-it situation in which we could have no bill or a bill without farmworker coverage. This is still the situation. The remaining features of the bill are worthwhile; and I believe that we should take the bill for the good that is in it, rather than let the whole thing go down the drain because it has not everything we would like. What is in the bill is good, and I suggest that we approve the conference report and try again for farmworker coverage after the special study of this issue—called for by the conference agreement—has been completed and analyzed. Perhaps then we can answer the questions which today remain unanswerable.

Mr. CRANSTON. Mr. President, I support the effort of the distinguished Senator from Minnesota (Mr. Mondale) and the distinguished Senator from Ohio (Mr. Saxbe) to reject the conference report on H.R. 14705, the Employment Security Amendments of 1970.

I do so, not because I am opposed to the unemployment insurance system. I believe that, except for the exclusion of farmworkers, this legislation is desirable.

I support this move to reject this conference report because I do support the concept of unemployment insurance, and because I believe the time is long past when Congress can continue to exclude farm labor from the protections and benefits that have been accorded to nearly all of the labor force in the Nation.

I believe that farmworkers should have the benefits of unemployment insurance, particularly because their work is seasonal.

During the summer and fall in California, unemployment among farmworkers is reasonably low. In the winter months, however, it is extremely difficult to find any kind of farmwork. Unemployment insurance is clearly the best remedy for the cyclical nature of agricultural employment. In the absence of a reasonable unemployment insurance system, farmworkers are forced into a welfare system which is too often paternalistic and demeaning.

There is no reason why the people who pick our crops, who harvest our food, should be treated as wards of the State or as second-class citizens.

A vote to reject the conference report will put the Nation on notice that the Senate will not tolerate the exclusion of these workers from the conditions enjoyed by other Americans.

Mr. YARBOROUGH. Mr. President, today we have before us a bill of great importance to all American working people. H.R. 14705 embodies the most significant amendments to the Unemployment Compensation Act since its enactment in 1935. Since this program was first put into action during the heart of the depression, it has furnished a measure of stability to those Americans who have found themselves without work.

Unfortunately, the Unemployment Compensation Act, like so many other Federal and State laws, excludes from its coverage farm workers. Probably no other single group of Americans need the protection of the Government more than farm workers, however, through the years, these citizens have been systematically denied the benefits of most Federal labor legislation.

Realizing that the time had come for Congress to face its responsibilities to American farm workers, the Senate included in its version of H.R. 14705 a provision which would extend the coverage of the Unemployment Compensation Act to farm workers who are employed on farms employing eight or more employees in each of 26 different weeks during the year. This provision was not aimed at the small family farmer but rather at the large farmers and growers who hire farm workers, on a regular basis. The Senate recognized that the small farmer who hires workers only during a brief harvest period, would have difficulty complying with the requirements of the Unemployment Compensation Act; therefore, the requirement that the farm employs eight or more workers was inserted to exempt small farmers. In the language of the Senate report:

"The provision would thus not affect the typical family farm or a farm employing more than eight workers for only a brief harvesting season."

This provision is, however, meant to apply to those large farming operations which employ thousands of migrant workers each year, and have, in many cases, failed to provide these workers with decent housing and fair wages.

The Subcommittee on Migratory Labor of the Senate Labor and Public Welfare Committee recently conducted extensive hearings on the plight of migrant workers in America. The evidence produced at those hearings clearly demonstrated that the life of the migrant farmworker is not improving but rather is getting worse. I have visited the homes and working areas of farmworkers in Texas and from my experience with these unfortunate people, I am convinced that the only way to improve the working conditions and lives of farmworkers is for Congress to bring these people under the protection of Federal laws.

The provision contained in the Senate version of H.R. 14705 concerning farmworkers represents a positive step forward in this area. I am deeply disturbed by the conference committee's failure to include it in the final version of H.R. 14705. Because I firmly believe that it is imperative that Congress expand its coverage of the Unemployment Compensation Act to include farmworkers, I shall vote against accepting the conference report and urge all of my colleagues to do likewise.

SUPPORT FOR UNEMPLOYMENT COMPENSATION COVERAGE FOR FARMWORKERS

Mr. GOODELL. Mr. President, with one overriding flaw, the conference report on H.R. 14705 is quite good. That unemployment compensation bill would extend the coverage of the unemployment compensation program to additional jobs, improve the financing of the program, and provide the States with a procedure for obtaining judicial review of adverse determinations by the Secretary of Labor.

The conference bill would, in particular, establish a permanent program of extended benefits for people who exhaust their regular State benefits during periods of high unemployment. In this period of recession, I am especially anxious to see that provision enacted.

Nevertheless, I will vote against acceptance of the conference report and for recommital to conference with instructions, because the conference bill fails to cover farmworkers. Th Senate Finance Committee amended the bill so as to extend coverage to employees of large farms, those farms which employ at least eight employees during each of 26 different weeks during the year. That provision, which was passed by the Senate, would have covered only 2 percent of all farm employers—approximately 22,000—and 20 percent of all farm employees—approximately 250,000.

Relatively few agribusinesses would be covered under this provision, and only the quite large ones. The original administration proposal, in fact, called for coverage of farm employers who have four or more employees in each of 20 different weeks during the year. It is unfortunate that the conferees did not emerge with that provision.

The Senate also passed an amendment offered on the floor by Senator MONDALE to extend coverage to farm crew leaders and their employees-migrant workers. This amendment, together with the Finance Committee's amendment, was dropped in conference.

Given the almost universal coverage of all other members of the labor force by the unemployment compensation system. I believe that it is inequitable to exclude agricultural workers, from coverage, and that there is no justification for the conference bill's discrimination against them.

Accordingly, I will support recommital of the bill to conference with instructions that the two farmworker provisions—the Finance Committee's and Senator MONDALE's—are to be insisted upon by the Senate conferees. In recognition of the need for recession benefits, I trust that the conferees will move swiftly and that we will soon see an improved conference bill enacted with provision of extended bnefits during periods of high unemployment.

The PRESIDING OFFICER (Mr. Cranston). The question is on agreeing to the conference report. On this question, the yeas and nays have been ordered, and the clerk will call the roll. The legislative clerk called the roll.

Mr. LONG (after having voted in the affirmative). On this vote I have a pair with the Senator from Oklahoma (Mr. Harris). If he were present and voting, he would vote "nay." If I were permitted to vote, I would vote "yea." I therefore withdraw my vote.

Mr. PELL (after having voted in the affirmative). On this vote I have a pair with the Senator from Connecticut (Mr. Ribicoff). If he were present and voting, he would vote "nay." If I were permitted to vote, I would vote "yea." I therefore withdraw my vote.

Mr. KENNEDY. I announce that the Senator from Indiana (Mr. Bayh), the Senator from Nevada (Mr. Cannon), the Senator from Connecticut (Mr. Dodd), the Senator from North Carolina (Mr Ervin), the Senator from Arkansas (Mr. Fulbright), the Senator from Tennessee (Mr. Gore), the Senator from Oklahoma (Mr. Harris), the Senator from Michigan (Mr. Hart), the Senator from Indiana (Mr. Hartke), the Senator from South Carolina (Mr. Hollings), the Senator from Minnesota, (Mr. McCarthy), the Senator from South Dakota (Mr. McGovern), the Senator from Montana (Mr. Metcalf), the Senator from New Mexico (Mr. Montoya), the Senator from Wisconsin (Mr. Nelson), are necessarily absent.

I further announce that the Senator from West Virginia (Mr. Randolph), the Senator from Connecticut (Mr. Ribicoff), the Senator from Georgia (Mr. Russell), the Senator from Missouri (Mr. Symington), the Senator from Georgia (Mr. Talmadge), the Senator from Maryland (Mr. Tydings), are necessarily absent.

I further announce that, if present and voting, the Senator from Nevada (Mr. Cannon), the Senator from North Carolina (Mr. Ervin), the Senator from West Virginia (Mr. Randolph), would each vote "yea."

I further announce that, if present and voting, the Senator from Michigan (Mr. Hart), would vote "nay."

Mr. GRIFFIN. I announce that the Senator from Vermont (Mr. Aiken), the Senator from Tennessee (Mr. Baker), the Senator from Nebraska (Mr. Hruska) and the Senator from Texas (Mr. Tower) are necessarily absent.

The Senator from South Dakota (Mr. Mundt), and the Senator from Maine (Mrs. Smith) are absent because of illness.

The Senator from Maryland (Mr. Mathias) and the Senator from North Dakota (Mr. Young) are detained on official business.

If present and voting, the Senator from Vermont (Mr. Aiken), the Senator from Tennessee (Mr. Baker), the Senator from South Dakota (Mr. Mundt), the

Senator from Maine (Mrs. Smith), and the Senator from Texas (Mr. Tower) would each vote "yea."

The result was announced—yeas 50, nays 19, as follows:

[No. 254 Leg.]

YEAS—50

Allen
Allott
Anderson
Bellmon
Bennett
Bible
Boggs
Brooke
Burdick
Byrd, Va.
Byrd, W. Va.
Church
Cook
Cooper
Cotton
Curtis
Dole
Dominick
Eagleton
Eastland
Ellender
Fannin
Goldwater
Griffin
Gurney
Hansen
Hatfield
Holland
Inouye
Jackson
Jordan, N.C.
Jordan, Idaho
Magnuson
McClellan
McIntyre
Miller
Moss
Packwood
Pearson
Percy
Prouty
Proxmire
Scott
Smith, Ill
Sparkman
Spong
Stennis
Stevens
Thurmond
Williams, Del.

NAYS—19

Case
Cranston
Fong
Goodell
Gravel
Hughes
Javits
Kennedy
Mansfield
McGee
Mondale
Murphy
Muskie
Pastore
Saxbe
Schweiker
Williams, N.J.
Yarborough
Young, Ohio

PRESENT AND GIVING LIVE PAIRS, AS PREVIOUSLY RECORDED—2

Long, for.
Pell, for.

NOT VOTING—29

Aiken
Baker
Bayh
Cannon
Dodd
Ervin
Fulbright
Gore
Harris
Hart
Hartke
Hollings
Hruska
Mathias
McCarthy
McGovern
Metcalf
Montoya
Mundt
Nelson
Randolph
Ribicoff
Russell
Smith, Maine
Symington
Talmadge
Tower
Tydings
Young, N. Dak.

So the report was agreed to.

Mr. Long. Mr. President, I move that the vote by which the conference report was agreed to be reconsidered.

Mr. Holland. Mr. President, I move that the motion to reconsider be laid on the table.

The motion to lay on the table was agreed to.

Senator Mondale. Senator Saxbe, do you have any questions?

Senator Saxbe. Thank you, Mr. Chairman.

Doctor, as you know, we are interested not only in the migrant problem but in the general health problem, in this committee. We have had quite a bit of testimony as to how we can get medical care to people even if these people are not migrants. If they are poor, they still need medical attention which they are not getting.

The Surgeon General and others have testified before us that at the present time the doctors just aren't available to staff the kind of outpatient clinics that are necessary or to do the fieldwork that is necessary.

Do you have any suggestions on how better delivery of medical care might be accomplished in your State or in the Southwest?

Dr. WHEELER. Senator Saxbe, the problem of the adequate delivery of medical care to all the people of our country is an extremely complex one, as you know. There is no simple solution that I can think of. It involves adequacy of numbers of medical and paramedical personnel; it involves more efficient means of delivery of care or greater use of that technology in bringing that care to the people.

One of the things that it involves most of all at this point, at least in a nation which has no national health insurance program, is the sufficiency of doctors for people to be able to buy medical care. If they can't get it, of course, they can't buy it.

Senator SAXBE. This is what we hear from the AMA but I just question this. If you have 200,000 physicians with 175,000 of them practicing, all working and working hard, and most of them are—if you just put more money into the thing, does that help?

Now, this, it seems to me, has been the kind of thinking which has brought us to the present place. Everybody says we will put more money into the program. You put more money in the program but you don't make more doctors.

Dr. WHEELER. No; you are correct. We certainly at this point do not have enough doctors in this country the way they are presently being utilized. As a matter of fact, I am certain that we could do a much better job of delivering medical care to the people of this country if the services of doctors were utilized in a much more effective way. There are many, many doctors in the country today who could help in this problem if their services were being more adequately utilized.

Senator SAXBE. Do you think the Federal Government is going to have to go to the doctor and say, "Look, you are wasting your time; you are not providing service; we will tell you how to spend your time."

Do you think that is what it is going to come to?

Dr. WHEELER. I hope not. I hope there is enough concern about this problem and interest and enough willingness to exert leadership on the part of physicians, not only on the national level in our associations, but also in our communities, that with the increasing pressures to do something about these problems the medical profession will assume its responsibility and participate with lay people at all levels on the planning of how to get medical care to people.

Senator SAXBE. One of the problems we face is the increasing pressure of the various colleges of surgeons and internists and so on to increase the qualifications. Recently, I believe this year, it was proposed that they add another year to surgical residence.

I have a son in surgical residence. He has been there 3 years. He has 2 more to go; and 2 years in the Army. He will be 33 years old before he hits a clinic.

It seems to me that we have to do something to get people at the local level to run a clinic. Now, they all want to go to the medical center and have offices next door to each other and pass people around. But I feel very strongly that we have to have 3-year general practitioners. We are doing this at Ohio State this year. We are starting a 3-year program and no internship. They spend 3 years in medicine and they go out. They are not going to be able to do brain surgery and things like that but they can certainly take care of the complaints and detect things that can be referred.

Now, can this be an answer?

Dr. Wheeler. This is one of the things I am talking about when I talk about the effective utilization of medical personnel. The length of time it takes to train a doctor is unnecessarily long, in my opinion—that is just one thing—and the failure to train and to utilize a large number of paramedical personnel who can do a great many things that doctors now have to do.

I think the fee-for-service system in itself has built into it all sorts of inefficiencies that make for poor medical care. I think there need to be many more prepaid plans, and there should be a countrywide program of national health insurance to extend to everyone the benefits that medicare and medicaid are now attempting to extend.

We are a little bit off the subject of my responsibility.

Senator Saxbe. We are, and we are not. The three of us, I know, see eye to eye because we supported this outpatient clinic amendment to the Hill-Burton Act. But if outpatient clinics were available at these migrant camps, even if you had to put them on trucks and haul them around—obviously the people you saw had not seen a doctor for a long time or had any medical treatment.

Your testimony indicates, and this is what we hear constantly, chronic cases where children are dying from illnesses that obviously reflect no medical attention at all.

If we can get more mobile facilities that move from camp to camp and at least have a sick call once a week, we would go a long way toward curing some of the things you referred to here; could we not?

Dr. Wheeler. It would help a great deal.

Of course, along with that there has to be also a very vigorous attack on sanitation, on housing, on water supplies, on sewage disposal, garbage pickup; all these things. Otherwise, you are simply putting a bandaid on a horrible wound.

Senator Saxbe. This is generally resisted at the camp level.

Dr. Wheeler. Resisted by who?

Senator Saxbe. By the camp owners.

Dr. Wheeler. Yes, sir. Very little cooperation. They make no effort in that direction at all, none.

Senator Saxbe. That is all I have.

Senator Mondale. Senator Yarborough.

Senator Yarborough. Doctor, I have followed your statement with great interest and, despite the failure of the executive departments to implement the laws of Congress, I want to tell you that this is one committee of Congress that is concerned over this problem, has been for at least 10 years, the Labor and Public Welfare Committee.

In mentioning hunger as being the basis of this, let me point out that the first hunger hearings that I recall started with this committee in 1967 and the leaders were Senator Robert Kennedy and Senator Joe Clark, of Pennsylvania. They went into the Delta, they went into California and said the people were starving; there was hunger. There was an assault on this committee generally by the press of America by saying there is no hunger, there is slander, politically motivated. They wrote editorials in paper after paper, including my own State.

After a year of investigations, many of those same papers changed and the editorials said there is hunger in America, there is malnutrition in America, and we have to do something about it.

A survey was made of my State. Nearly all the people on the team were from Texas so that they would not be open to a charge that they brought in outsiders. They had made a similar survey in Guatemala. They had found conditions of hunger in areas of Texas very similar to the areas in Guatemala.

The efforts of this committee ran jurisdictionally into the opposition of the Agriculture Committee of the Senate. So, to keep that problem of conflict from stymieing the work, it was agreed that a Special Select Committee on Malnutrition and Hunger would be established. The Senator from South Dakota is chairman of that committee. I am a member of that committee as a representative of the Labor Committee.

We continued work and we put in more money; we added an amendment on the floor of $500 million for that, additional money, for the school lunch program.

But the tragic thing about it is, as you have pointed out in all the testimony before that committee, we asked the question, How much would it cost to end hunger in America? That question was asked of Secretary of Agriculture Freeman in January of last year just before he left office. Acting with his staff and knowledgeable people, he said a billion dollars. That was the lowest estimate we had.

The highest estimate—and the only people we asked were the people who know the prices of food and deal with distribution—was $3 billion. The highest estimate we had from anyone to end the hunger in America was $3 billion a year. They have been spending $3 billion a month in South Vietnam for years.

We saw news media, that used to sweep this under the rug, say we spent $110 billion on the war in South Vietnam. The debilitating cost of that war is pulling down American society. It did not cause hunger in America; we have had it all these generations, but it has held down the money.

People decry the expenditures, say you are spenders, spenders. The strange thing is when we spend money on food they call us spendthrifts. They never call spendthrift anybody who votes for the squandering of that money in Southeast Asia. From the national resource standpoint alone, and the health and strength of this Nation, it is folly. It is absolute folly.

You put your finger on that. In one of the paragraphs of your prepared statement, among other things you mention, "How can the Congress and our Nation's leadership pretend to be related in any sane way to the world around them when they spend all of their money, and that is the big drain, in Southeast Asia.

I think when we put up the money to build the tiger cages and go and inspect them and know they are there, we are just as responsible for the tiger cages as any petty dictator in South Vietnam. We gave them the money and we sent our supervisors around there to see them.

I assure you there are concerned people. We are intelligent enough to know the cost. Those of us who have been working on that, a number of us, Robert Kennedy was assassinated; 2 years before that Paul Douglas was defeated in Illinois; 2 years ago, Wayne Morse on this committee and Joe Clark on this committee, two of the most active men in this field, were defeated. I was defeated May 2.

Now, we all have intelligence enough to know when you try to do something for the poor you run a great risk of not coming back. But the encouraging thing is that each time one of us is liquidated politically or otherwise, there is another man waiting. You see him here in Mondale of Minnesota, Kennedy of Massachusetts, Cranston of California, Hughes of Iowa, Eagleton of Missouri on the full committee. There are more standing ready to take their places.

So, I think the movement for justice in this field is going to grow. I don't think the fact that a number of us get politically liquidated is going to stop the movement for justice in America for food and medical care.

Senator Saxbe has put his finger on one thing, the avarice that has kept America from educating enough doctors. Let us face it. We have had such a monopoly that we could not get enough medical schools. We have 160 doctors per 100,000 population. Soviet Russia has 280 doctors per 100,000 population. They are educating just as fast as they can, increasing their medical schools to get 360 doctors per 100,000 population. They have found that is the size of a medical corps that it will take to care for the health of the people. For each doctor, they have a medical assistant that we are beginning to provide for in our law. Something like a halfway doctor, you might say, not a physician or surgeon but the medical assistant, one for each medical doctor in Russia.

We, being the richest and most affluent Nation that the world has ever seen, cannot remain down where we are in health for the people. We can no longer remain 21st among the nations of the world in the average longevity of a male child.

A male child born in America, as you know, being a doctor, has an average shorter life than a male child born in 20 other nations on earth. Our infant mortality rate puts us down about 14th among the nations of the world. This is a shame, it is a thing that must be alleviated.

I have been on this health subcommittee for 12 years, and have supported every measure to improve the health of our citizens, like the one to build 20 new medical schools and dental colleges under the Hill-Burton Act. I floor-managed the action recently in which we overrode the Presidential veto on putting a mere two and three-quarter billion dollars more for 5 years to build hospitals and outpatient clinics. We know that is a token based on the needs but that is all we could pass.

I want to say that this committee is concerned and has been working on this for years. We pass laws in the Senate but by the time they get through the conference with the House they are always less.

We had a $6 billion hospital bill we passed out of this committee and it passed the Senate, $6 billion for 5 years. When we finished with the House in a conference, we were lucky to get out with two and three-quarter billion dollars.

So, what is needed is something to strike the conscience of the Nation. We need a reorientation of national priorities so that the health and education of the people become foremost objectives of this Government, not bragging about what the kill ratio is in South Vietnam, not bragging about how many tons of bombs we drop. We dropped month after month a greater weight of bombs on North Vietnam than were ever dumped on Germany and Japan together in World War II.

The thing we ought to brag about and put in headlines on the front page is how much hunger we have alleviated in this country, how much disease we have cured, not how many people we have killed. We have to turn from a death-oriented society to a health-oriented society and improve the health care for the people in this country.

Yours is one of the most powerful statements I have seen in 12 years on the health subcommittee.

Thank you for the contribution you are making to alleviate the conditions of life in these United States.

Dr. WHEELER. Thank you, sir.

Senator MONDALE. Dr. Wheeler, we have interrupted your fine statement on several occasions, so I order it printed in its entirety at this point in the hearing record.

(The prepared statement of Dr. Wheeler follows:)

PREPARED STATEMENT OF RAYMOND M. WHEELER, M.D., CHARLOTTE, N.C.

My name is Raymond M. Wheeler. I am a physician engaged in the private practice of Internal Medicine in Charlotte, N.C. I am a member of the American Medical Association, a Fellow of the American College of Physicians, and am certified as a specialist in Internal Medicine by the American Board of Internal Medicine. I am also President of the Southern Regional Council, an organization of black and white Southerners, who for twenty-five years have sought and worked for equal opportunity for all citizens of our region.

During the past three years I have studied the health and living conditions of the poor in North Carolina, Mississippi, Alabama, Florida, Southwest Texas, Appalachia, and in the ghettoes of Northern cities. I have examined children, talked to their parents, and visited their homes and schools. I have served as a member of the Citizens' Board of Inquiry into Hunger in the United States which published the report entitled *Hunger, U.S.A.* I have testified before committees of both the House and Senate of the United States concerning the existence of hunger and malnutrition throughout this country.

In January and again in April of this year I traveled with other medical colleagues in Southern Florida observing the health and living conditions of migrant farm workers. In March of this year, my colleagues here today and I visited Hidalgo county in Southwest Texas. We were part of a medical team of about twenty-five physicians, medical students and technicians. There we spent five days examining farmworkers and their families, talking with them and other members of the community, and visiting homes and labor camps in which the people live.

Beginning with our visits to Mississippi and Alabama in 1967 and including our trips to Florida and Southwest Texas this year, the efforts of all the physicians involved in this work have been sponsored and encouraged by the Field Foundation. The purpose of our studies and our reports have always been the same. We have sought to observe and study the life situations of children of the poor, in order to bring their condition to national attention. Their condition is one of sickness and poverty, isolation and neglect, indifference and exploitation, resulting in tens of thousands of children who exist in our country today without hope, denied their basic rights as human beings, and condemned to lives of pain, frustrations, and despair. In our minds there can be no question about this fact. It seems equally certain that this tragic situation is directly related to another. In our affluent, money-oriented society, human needs of children have been subordinated to political and economic interests.

It would not be consistent with our beliefs or our purpose to portray those interest as intrinsically evil. Rather, we see them as basically uninformed, insensitive, and uncaring about the vast and irreparable harm that is being done not only to children, but to the very fabric of a society in which these children must live and take their places as adult citizens.

Wherever we went, in the South, the Southwest, Florida, or Appalachia the impact was the same—varying only in degree or in gruesome detail.

We saw countless families with large numbers of children, isolated from the mainstream of American culture and opportunity, possessing none of the protections of life and job and health which other Americans take for granted as rights of citizenship.

If the farmworker is injured in the field or if he becomes ill from exposure to pesticides (we heard of and saw many instances of both situations), he does not receive Workman's Compensation. If he is sick or cannot find work (and there are many days when work is not available) he does not receive unemployment insurance. There is no realistic minimum wage to guarantee him adequate pay for his work. If Social Security payments are deducted from his wages, few records are kept by the crew boss on which he can later base a claim. He has no health or hospital insurance to provide him with minimal medical care and he does not earn enough to purchase it. The farmer is not even prohibited from working young children in the fields if the parents, desperate for enough money to buy food and shelter, choose to take their children out of school or bring along their pre-school age children to pick the vegetables.

We saw housing and living conditions horrible and dehumanizing to the point of our disbelief. In Florida and in Texas, we visited housing projects, built with public funds, which defy description. We saw living quarters constructed as long cinder-block or wooden sheds, divided into single rooms by walls which do not reach to the ceilings. Without heat, adequate light or ventilation, and containing no plumbing or refrigeration, each room (no larger than 8x14 feet) is the living space of an entire family appropriately suggesting slave quarters of earlier days. I doubt if the owners of fine racing horses or dogs along the East Florida coast would think of housing their animal property in such miserable circumstances.

We saw many different kinds of housing and perhaps some of the worst from the standpoint of structural soundness (owned by those who lived there) did not create in me the feeling of outrage that some of the "better" housing did. For example in Dade County we looked at quarters operated by the Homestead Housing Authority with public funds. There someone had sat down at a drawing board and deliberately and callously designed a living unit which consisted of a single room with concrete block walls, divided partially by a block-partition which jutted out in the center of the room. There was one door and one small window high up under the ceiling. The room was dark and damp at mid-day. There was nothing in that unit to make it habitable. There was not one gesture toward providing either comfort or basic human needs—no source of water, no toilet, no refrigeration, no heat, and the lighting was so dim that no child could have possibly been able to read or study. This was the creation of a public authority, a place in which it was willing for other human beings to live.

Can you imagine the effects on a child of living in such a situation—the physical discomfort of the heat, the cold, the dampness? The absence of fresh air and the crowding greatly increases the likelihood of transmission of contagious disease. This is why so many have tuberculosis as well as chronic respiratory infections. How is it possible for a child to study and perform in school when it is impossible for him to read by the light available to him? How can he possibly be emotionally well-adjusted when he has no privacy—when he lives in a cage? How can he possibly stay awake in school the following day when he has attempted to sleep in a bed with three or four of his brothers and sisters?

How can this be, in a society such as ours, with the values we are presumed to cherish?

In all of the areas we visited, the nearly total lack of even minimally adequate medical care and health services was an early and easily documented observation. Again, that which most Americans now agree to be a right of citizenship, was unavailable to most of the people whom we saw. The standard procedure of requiring cash for services and a cash deposit before hospital admission, places an impossible burden upon those least able to afford the high cost of being sick.

Documentation of discrimination in medical services and denial of medical care will be described during the course of the hearings.

We saw hundreds of people whose only hope of obtaining medical care was to become an emergency which could not be turned away. We heard countless stories of driving 50 or 100 miles to a city general hospital after refusal of care at a local hospital. Mexican-American citizens of the U.S. told us of crossing the border into Mexico for dental and medical treatment which was less expensive and for care which was kinder, more humane than they could obtain in their own communities. We heard of diagnoses and treatment by nurses, endless waiting for simple procedures such as immunization of small children, and degrading treatment by medical personnel.

A few statistics substantiate our observations. The migrant has a life expectancy twenty years less than the average American. His infant and maternal mortality is 125% higher than the national average. The death rate from influenza and pneumonia is 200% higher than the national rate and from tuberculosis, 250% higher than the national rate. The accident rate among migrant farmworkers is 300% of the national rate.

We know from these statistics alone that the migrant and seasonal farmworkers live shorter lives, have more illnesses and accidents, lose more babies, and suffer more than the rest of us. Everything that we saw and heard in Florida and Southwest Texas bore out this knowledge.

From the moment we set foot in Hidalgo County until we departed, our medical team was engulfed by a seemingly endless procession of distraught and anxious parents, bringing their elderly relatives and their families of six, eight, or ten children—seeking medical treatment which they could not obtain in their own communities. Most of these people live constantly at the brink of medical disaster, hoping that the symptoms they have or the pain they feel will prove transient or can somehow be survived, for they know that no help is available to them. Only two groups have any hope for relief: Those who are somewhat better off financially and those who are most critically ill. Some of the people we saw were not seriously ill, or perhaps not ill at all, but none of them knew, and most had never had the opportunity to find out, if they were healthy or whether tomorrow might bring disaster. Our group was not equipped to offer very much in the way of definitive treatment for the vast amount of illness we saw. Perhaps the most constructive and most helpful acts that we performed involved the opportunities to assure some, who had never seen a physician before, that they were, indeed, well and could continue their struggle to survive without the nagging fear of physical disability or death.

For the rest, the majority of the hundreds of people we examined, it was a different, frustrating, and heartbreaking story. We saw people with most of the dreadful disorders that weaken, disable, and torture, particularly, the poor.

High blood pressure, diabetes, urinary tract infections, anemia, tuberculosis, gallbladder and intestinal disorders, eye and skin diseases were frequent finding among the adults.

Almost without exception, intestinal parasites were found in the stool specimens examined. Most of the children had chronic skin infections. Chronically infected draining ears with resulting partial deafness occurred in an amazing number of the smaller children. We saw rickets, a disorder thought to be nearly abolished in this country, and every form of vitamin deficiency known to us that could be identified by clinical examination was reported.

I doubt that any group of physicians in the past thirty years has seen, in this country, as many malnourished children assembled in one place as we saw in Hidalgo County.

There is one place I remember particularly—a labor camp in Weslaco, a small town East of McAllen.

As we walked between the rows of dwelling units, many small children played around us, running about barefooted through mud and pools of stagnant, refuse-filled water—the perfect culture medium for intestinal parasites, polio, and bacteria causing infectious diarrhea which kills so many children.

We stopped and examined children at random and almost every child had some preventable physical defect. We saw tiny youngsters drinking rice water out of bottles because their mothers had no milk to give them. Chronic skin infections, both fungae and bacterial, were practically a 'normal' finding. Rickets is supposed to be a rather rare disease these days but we saw one child after another with deformed ribs and legs, thickened wrists which are the classical landmarks of the disease. One youngster, standing apathetically near a group of playing children, had all the stigmata of advanced protein deficiency—sparce, thin, reddish hair, thin drawn face, protuberant abdomen, and thin, wasted extremities.

We stepped into one single-room dwelling unit where lived parents and six children. Amazingly, it was spotlessly clean in spite of the fact that the nearest source of water was a block away.

On the bed lay a 3-month-old infant, who weighed less than the average newborn. It was emaciated, restless, wailing, and occasionally pulling at a bottle which we soon discovered contained sour milk. There was no refrigerator in which to keep formula. The child had been ill for weeks, according to its mother but at its last visit to the clinic, a day or two earlier, no medication had been prescribed. A very quick examination disclosed pus pouring from its right ear. We made arrangements for the child to have penicillin and individually packaged feedings of formula which the mother could not afford. I suspect we were too late and I doubt if the child survived.

What I have just attempted to describe in Weslaco is documented on film taken by Martin Carr of NBC. When the decision was made to confine the documentary on the migrant to Florida, that film was not used and remains in the possession of NBC. It is my hope that it will be preserved and made available to the nation, for it portrays conditions which cannot be adequately described by mere words.

Because of the tremendous numbers of people who sought our help in a limited time, we interviewed and examined entire families as a unit. In one tiny rural settlement, with a medical student assisting me, I spent an entire day examining one family after another. It was a shattering experience.

Their dietary histories were all the same—beans, rice, tortillas, and little else. The younger children, especially, were undersized, thin, anemic, and apathetic. The muscles of their arms were the size of lead pencils—a sign of gross protein malnutrition. Many had evidence of multiple vitamin deficiencies and almost without exception, their skins were rough, dry, inelastic with the characteristic appearance of Vitamin A deficiency. I remember vividly the shock I received when one young boy was brough in who was well nourished and I touched his skin—warm, soft, resilient—unlike any I had seen all day and I called to the student with me to come and put his hand on that child in order that he might refresh his memory of what a healthy skin feels like.

The children we saw that day have no future in our society. Malnutrition since birth has already impaired them physically, mentally, and emotionally. They do not have the capacity to engage in the sustained physical or mental effort which is necessary to succeed in school, learn a trade, or assume the full responsibilities of citizenship in a complex society such as ours.

In 1967, my medical colleagues and I traveled through the Mississippi Delta and rural Alabama. There, we saw hunger and poverty and human misery to a degree that we had not dreamed possible in affluent America. In 1970, two and one-half years later, we have found in Florida and Texas, rich and fertile states, other forgotten Americans, living and working in near slavery, their children living and dying in conditions as dreadful as any we had previously encountered.

It is not likely that we saw more malnutrition or more human misery than we had seen in the Delta. Perhaps, in the time that we were there, we did not experience as much overt hostility expressed by the white community as we had sensed in Mississippi and Alabama.

In the Delta, mechanization of the huge farm industries had rendered thousands of people useless to the economy, and they were left to die or to survive as best they could. In some instances, it seemed clear that there was an unspoken conspiracy to solve the problem by making life so intolerable that people were forced to flee the land and the state in which they could no longer earn a living. No longer needed and unable to secure help from the white community, the black Mississippian at least had the freedom to leave, if he were able, and to seek a better life elsewhere.

In Florida and Texas, the farm worker remains a valuable asset to the owners and operators of the huge farms which produce food and fruit for the nation. Without them, corn and tomatoes would rot in the fields and oranges and grapefruit would shrivel on the trees. There is no way that these farms can be operated without the migrant work force which moves about the area, harvesting the beans and squash this week, moving on to gather the avocadoes another week, in another county. Mechanization has not yet devised a way to replace them.

What is different in Florida and Texas from the rest of the rural South is the deliberate, cruelly contrived, and highly effective system which has been devised to extract the maximum work and productivity from other human beings for the cheapest possible price. Every effort is directed toward isolating the farmworker from the rest of society, maintaining him at the lowest level of subsistence which he will tolerate—then making certain that he has no means of escape from a system that holds him in virtual peonage. And to that end, the grower has the full cooperation of the Federal government, the state, and the local community.

At this point in my report, in order that what I say next will not be misinterpreted, I would like to express my high regard and respect for the members of the Subcommittee on Migratory Labor and my admiration for the hard work, the commitment, and the efforts of all of you in your attempt to better the life of the migrant. No one has done more.

At the same time, I have questions which I feel must be raised or I will not have carried out my responsibility to you or to the people about whom we are both concerned. These questions relate to the reasons for this hearing and the many hearings which have preceded it on the same and related subjects. You are perhaps even more aware than I of the volumes of information and the days of testimony which are already available to you and to the Congress, documenting the fact of children in our midst who are stunted physically, dulled mentally, and warped emotionally—children who are deprived of all opportunity to become productive citizens—children who will grow up to become wards of society or worse—perhaps hostile, alienated, and destructive.

I have here a copy of a report of the President's Commission on Migratory Labor, written and submitted to President Truman in 1951. Even a cursory examination of its pages will reveal that the plight of the migrant has not changed significantly during the intervening nineteen years.

What does it take to make us care about our children? The picture we saw is one of a society thriving on greed, cruelty, alienation, and fear—a society which either never had or has completely abandoned the concerns, the ethics, the ideals which make dignity and freedom possible.

What has to be done to convince the Congress of the United States, the most powerful group of men in the world, that the time has come to put aside its greed, its prejudice, its concern for personal power and prestige—and to be concerned for the kind of society in which our children must live together?

You, and only you, can change all this. How is it possible to justify the endless words and the devious political maneuvers which have delayed and withheld meaningful aid to children who don't have enough to eat, children whose parents have no jobs and no money for food or medical care? How can the Congress and our nation's leadership pretend to be related in any sane way to the world around them when they spend their time and the nation's wealth building roads and guns and planes and elaborate governmental buildings while families live 10 or 12 in one room without water, heat, ventilation or even a place to wash their hands?

And children die—even worse—most of them live, numbed by hunger and sickness, motivated only by an instinct for survival, crowded into the ghettoes of horror which abound in our country which produce desperation and loss of faith in our system. Our answer seems to be more police, more guns, and more punitive laws whenever they protest.

We came away from Florida and Texas with tremendous admiration for the leaders of the people we met. These men, often at great risk, working to give their people hope and leadership which would dispel their apathy and despair. In many respects these people were stronger than most of us. They endure what seemed to me to be the unendurable, with patience, humor, and understanding. Remarkable in view of the misery which surrounds them and the powerlessness they experience. They have not given up the hope that we, who can help, will someday raise our voices and say that there are some things in our country which are intolerable, that these things can be changed, and must be changed. Our time is running out.

Senator MONDALE. I think we should now turn to Dr. Lipscomb.

STATEMENT OF HARRY LIPSCOMB, M.D., DIRECTOR OF THE INSTITUTE FOR HEALTH SERVICES RESEARCH, BAYLOR COLLEGE OF MEDICINE, HOUSTON, TEX.; AND MEMBER OF THE CITIZENS BOARD OF INQUIRY INTO HEALTH CARE SERVICES

Dr. Lipscomb. Senator Mondale, Senator Saxbe, and fellow Texan, Senator Yarborough:

I am Harry S. Lipscomb, M.D., director of the Institute for Health Services Research, Baylor College of Medicine, Houston, Tex., and a member of the Citizens Board of Inquiry into Health Care Services.

For the past several years I, like Dr. Wheeler, have been trying to get a fix on the problems of the poor, the disenfranchised, and the migrant workers in our country. I speak of the people in the cities as well as people in the rural areas.

You have requested that we tell you of the findings of a group of physicians who recently surveyed the health conditions of migrant and seasonal farmworkers in south Texas. I do so with reluctance, because I am ashamed, as an American, of what we saw; and concerned, as a physician, that my colleagues and I have failed to act as leaders in the face of demonstrated need, to structure the delivery of our services so as to reach every man, woman, and child in our Nation.

Dr. Wheeler has given an overview of what our team observed in Texas and Florida. I will now document our findings in the Rio Grande Valley.

From March 3 through March 8 of this year, our health team examined patients in clinics and "colonias" of Hidalgo and Starr Counties, Tex. Histories and physical examinations were performed on 1,400 individuals, the majority of whom were Mexican-Americans living in and around the City of McAllen, Tex. This team, which consisted of 15 physicians, 10 medical students, four technicians, and two nurses, saw patients from early morning until midnight for 4 consecutive days. On some, we performed blood counts, urinalysis, chest X-rays, pelvic examinations, and stool cultures. In addition, we collected drinking water from six "colonias" for bacteriological examination.

It had been our intent to examine 50 families in great depth, but we were confronted on March 4 by over 900 people who lined the streets around the small clinic in which we worked. We had intended to document, but not treat illness.

Within the first hour it became clear that the people had come for treatment, and their manifest need was so overwhelming that we hastily arranged with a neighboring pharmacy to provide medications and vitamins. In 4 days, we prescribed and administered in excess of $6,000 worth of drugs, which were subsequently paid for by the Field Foundation.

The McAllen area was selected because of an expressed need of the community, and in addition, a well-documented nutritional study of that region was reported to the Select Committee on Nutrition and Human Needs of the U.S. Senate—(90th Congress, second session, and 91st Congress, first session: "Nutrition and Human Needs," part 3, the National Nutrition Survey, pages 880–922. I am sure that the members of this committee are familiar with the document. Following our visit, we have often had occasion to refer to it.

Two years after the report was submitted, 15 months after the inauguration of the surplus commodities program, 7 years after the passage of the Migrant Health Act, little has changed. Disease, malnutrition, and human suffering continue. This in the face of more than $6 million in farm subsidies, significant civic improvements, new roads and highways, and new hospital construction assisted by Hill-Burton funding.

In short, the Mexican-American is still a disadvantaged person.

This report will simply relate what we were able to document from our clinical impressions, X-rays, and other supporting laboratory data. It would be impossible to identify a specific cause for many of the conditions: we will describe a child with a cleft palate which had not been surgically repaired, a patient who needed glasses and had not gotten them, a mother with a cervical infection which had not been treated, or a person who did not have adequate dental care, each constituting documentable evidence of disease.

On the other hand, that these conditions have occurred, or have not been remedied may be ascribed to ignorance or lack of awareness on the part of the individuals, to lack of availability of services, or to economic barriers which cannot be identified in all cases, with certainty. We simply cannot link disease to the reason for the disease except in a few isolated instances.

We would like to say that all malnutrition which we saw was due to an inadequate commodity program in Hidalgo and Starr Counties, or that poor dental care was due to a limited number of dentists and the high initial cost for care, but we do not believe that a survey of this kind can be so used. For every case of health hardship we saw involving lack of physicians, inadequate funds, or improper food, we saw a balance of patients who, for socio-cultural reasons or lack of educated health "awareness," failed to seek care. Perhaps in the culture of poverty, failure to seek reflects the hopelessness of poverty, the apathetic despair of a culture which has done without for so long that even the aspiration for care is lost.

This very apathy and despair which has characterized every poor community I have visited is, unfortunately, used as evidence that the poor will not avail themselves of our services if they are provided. I believe the overwhelming turnout of the people of the Rio Grande Valley to our accessible clinic gives the lie to this popular misconception. These people are hungry for care. They are dying for want of it.

We note in the hearings on migrant labor the persistent effort somehow to define a migrant as subhuman. "They like to drink; they will destroy property if you give it to them; they are lazy. If you give them enough to eat, they won't work. They are gypsies." These descriptions of the impoverished are the means by which those able to help seek to excuse themselves from the responsibility to help.

Any inference that the poor don't want medical care is an outrageous stab at logic. To say that they 'like to be sick' is only an excuse. Of course, what happened in this overpowering response to our brief stay in the community is more than enough proof that sick people desperately want care.

In our hearings at McAllen, we heard repeated statements from the poor that they did not go to the hospital because they thought they were going to be insulted; they didn't have money for the fees, and they probably would be turned away and sent somewhere else. Many families, for example, would not think of having their babies delivered in a hospital. They were afraid that the mother and the child would be held in the hospital until the bill was paid.

Senator YARBOROUGH. They have been told that they would be held until the bill would be paid. I don't know that the hospital administrator told them that. It seemed some hospital attendant told them that and the word spread like wildfire.

Dr. LIPSCOMB. I often hear the justification for poverty that no matter what one does for the poor, they will not, of their own volition, don't aspire to something a little better. It is also said that if the poor seek a better life. I believe there are very few suppressed peoples who are given $1,000 they will spend it; they don't know how to handle money. It is a rationalization that they are prolific, irresponsible, lazy, and will not do the proper thing even if we provide for them. These are totally senseless arguments when related to provisions for the health sanitation, feeding, and education of the poor in our country.

In analyzing the results of our study, we have been able to classify the conditions which we saw into the following categories:

1. Infectious disease.
    - (*a*) Bacterial.
    - (*b*) Viral.
    - (*c*) Spirochaetal.
    - (*d*) Pungal.
    - (*e*) Parasitic.
2. Toxic disorders.
3. Metabolic disease.
4. Nutritional disease.
5. Neoplastic disease.
    - (*a*) Benign.
    - (*b*) Malignant.
6. Traumatic injury.
7. Congenital disease.
8. Degenerative disease.
9. Dental disease.
10. Speech, hearing, and vision defects.
11. Mental, emotional, developmental, and learning disorders.

1. INFECTIOUS DISEASE

Bacterial and viral infections were the most common, often hygiene related, conditions we observed. In these two areas we really have quite effective methods for treatment, so that it cannot be reasoned that poor health is an irremedial situation.

The bacterial infections which we observed included otitis media, bronchitis, laryngotracheobronchitis in children, conjunctivitis, uveitis, acute and chronic follicular tonsillitis, pyelo-nephritis, urethritis, and impetigo. Associated inflammatory conditions, perhaps of non-bacterial origin, included cholecystitus, gastritis, and esophagitis.

In regard to hygiene, we found nursing mothers with mastitis (infection of the breast), and on two occasions we examined bottles of milk for infants which were contaminated and the milk soured.

Viral diseases were common. Many children and entire families were suffering from upper respiratory infections. A number of communicable childhood diseases were seen, including rubella. As you know, there is a national campaign to protect our child-bearing women from internal uterine rubella. This disease can be eliminated in our country in the next 10 years.

Senator Mondale. Did you see any effective anti-rubella (measles) campaign underway in that community among the poor migrants?

Dr. Lipscomb. I did not.

It is some significance that shortly after we left, an epidemic of poliomyelitis occurred in the Valley, resulting in three deaths. This is the only poliomyelities reported in the United States in 1970. If it is reasoned that the Mexican border is an open seeding source, then our very protection lies in immunization. We have failed to provide protection for the Rio Grande valley communities in this critical area.

Senator Yarborough. Doctor, was that polio promptly reported?

Dr. Lipscomb. I do know that Dr. Casso saw a few of these cases. I suspect the first one was difficult to diagnose because we have not seen polio recently.

Senator Mondale. We have an article concerning that polio epidemic that I will order inserted in the record at this point.

(The article referred to follows:)

[From the Valley Morning Star, Weslaco, Tex., July 17, 1970]

Apathy Still Factor in Battle of Polio

WESLACO.—Anna Isabel Trevino has full brown eyes that brim with the special shine of a 2-year-old.

And she has that special smile that carries a child through happy or hard times.

Her grin never really changes. But the times have. And they are bad for the tot from Rio Bravo, Tex.

She lies in a bed at Knapp Memorial Hospital in Weslaco. She does not move her arms or legs. She has a fever, a stiff neck and sore muscles and she doesn't understand why.

Anna Isabel has polio.

The disease that was a household horror until Dr. Jonas Salk and his miracle vaccine made it rare in the late 1950s, is making a deadly comeback in the Rio Grande Valley of Texas.

STRIKES VERY YOUNG

It strikes the helpless and the innocent. It strikes the very young.

Fourteen cases of polio have been reported in Cameron and Hidalgo counties which border Mexico. Three children have died so far this summer.

"Polio is still around because of apathy," said Dr. John R. Copenhaver, health director for the two Texas counties and the man in the eye of the epidemic.

Most of the 14 polio victims were under one year of age. The oldest was 3. None of the children was immunized against the disease.

"The only way to overcome apathy is to force people to be immunized and to reward them if they do," Copenhaver said. "For instance, in order to travel or go to school or to receive welfare."

POOR HIT HARDEST

Polio can strike the rich or the poor. But in the Rio Grande Valley it has chosen the poor. Federal, state, and local health officials have started an immunization campaign, dispensing 54,000 doses of oral polio vaccine in a four-county area.

The epidemic prompted state legislators and health officials to consider legal methods to force parents to have their children immunized.

"It certainly has been called to my attention," said Gus F. Mutscher, speaker of the Texas House of Representatives. "I think the best thing I could do at this time is to have a conference with the head of the Texas Education Agency and the Health Department."

Many cities and school boards have required polio immunization. But Dr. J. E. Peavy, state health commissioner, said school programs would not help the current outbreak.

"All but one of the children involved are under 2 years of age," Peavy said.

URGES EARLIER START

Copenhaver said school programs do not attack the disease early enough in children.

"We can't afford to wait until they are school age," he said. "They should be immunized in the first year of birth. It could be made mandatory for a birth certificate."

Anna Isabel Trevino got her birth certificate and was struck down by polio in her second summer because she was not immunized.

The Texas State Health Department now sends to county health departments lists of infants born in their areas. County officials then mail letters to all mothers, urging them to have their children inoculated.

ADDRESS PROBLEM

"But the address is so frequently wrong. It makes it awfully difficult," Copenhaver said. "We are now recommending that more information be given so children can be accurately followed up.

"When they come into the clinic, they receive all the immunizations—diphtheria, whooping cough, tetanus, measles and smallpox—as many as two at one time."

The treatment is free for those who cannot afford it.

Despite the free clinics, door-to-door campaigns this summer and warning letters, polio continues to pop up, especially among the poor.

"I don't think the financial status has anything to do with polio" except for the lack of money to pay for regular visits to a pediatrician, Copenhaver said. "The sanitary conditions or the closeness of individuals might be involved."

CROWDED LIVING CONDITIONS

Many Mexican-Americans in the Rio Grande Valley, including thousands of migrant farm workers, live crowded together with substandard sanitary conditions.

The upper respiratory virus that causes polio can be inhaled through cough droplets from another person or transmitted directly by body filth found in all economic levels, Copenhaver said.

He said surveys indicate the large migrant families are immunized better than nonmigrant families "because we put more emphasis on our migrant program here and there is emphasis up and down the migrant streams."

Dr. Lipscomb. A number of patients were reported to have syphilis, and this was confirmed by serology. Fungus infections were common, particularly monilial vaginitis, stomatitis, and tinea corporis.

Chest X-rays revealed the presence in at least three individuals of healed histoplasmosis, and at least two cases of previously undetected active pulmonary tuberculosis were discovered, one in a small infant and one in a middle-aged woman with a family of four children.

Intestinal parasits were the rule. Under the microscope, pin worms, hook worms, round worms, and amoeba, often occurring in combination in a single patient, and invariably occurring in several members of the same family, were seen. This points up Dr. Wheeler's account of the danger of close living quarters. Opportunity is great for infectious viral diseases to spread where adequate living quarters and sanitation are not the order of the day.

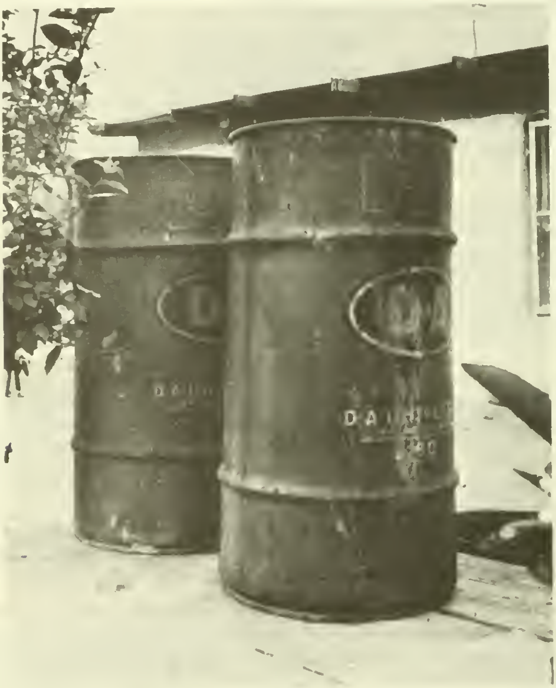
We took eight drinking water samples from six "colonias" to determine the condition of the drinking water. We also wanted to examine cultures from water used in the preparation of babies formulas. Of the six "colonia" water supplies tested, five were contaminated with fecal organisms.

Senator YARBOROUGH. In some of those instances, Doctor, did the water come from open irrigation ditches?

Dr. LIPSCOMB. I am told they were. In fact, I have a photograph of two contaminated water barrels that served four families, a total of 23 people, which I would like to submit for the record.

Senator MONDALE. By all means, let us include that at this point in the record.

(The photograph referred to follows:)



Dr. LIPSCOMB. Cramped living quarters combined with contaminated drinking water virtually assure the spread of any communicable or parasitic disease.

2. TOXIC DISORDERS

We had reason to suspect that a certain percentage of the migrant workers were exposed to toxic materials, notably pesticides used in the agricultural industry. Acute pesticide poisoning is easily diagnosed. We saw evidence of this.

On the other hand, many patients gave us a history of having been sprayed in fields shortly after a rain, at which time they suffered numbness and tingling of hands and feet. Many described a seasonal skin rash associated with the use of pesticides, especially organophosphorous compounds, and chlorinated hydrocarbons.

3. METABOLIC DISEASE

Metabolic disease in this population included diabetes mellitus which occurs in high incidence in the Mexican-Amercan. We feel that the examination of urine alone, while relatively unsatisfactory as a diagnostic procedure, uncovered 14 patients with previously undetected glycosuria. These patients must now be studied with glucose tolerance tests to confirm the presence of diabetes.

Thyroid disease was common, and several cases of thyrotoxicosis were observed and at least two cases of myxedema (thyroid deficiency) were seen. We were impressed with the palpably enlarged thyroid glands. The McGanity report had earlier emphasized the presence of endemic goiter in the valley population, and this was again confirmed by clinical examination. It is not absolutely certain that the genesis for goiter is iodine deficiency alone. The possibility exists that the people of the valley may live on a diet that is itself goiterogenic.

4. NUTRITIONAL DISEASE

Nutritional disease was common and consisted primarily of protein malnutrition. Caloric malnutrition was not seen, and the pathetic wasting of prisoners of war and individuals in certain Far Eastern countries was absent. While we did not see people who were wasted and emaciated from simple starvation, we did see people who were suffering from an imbalance in the mixture of their foodstuffs so that they were eating carbohydrates, almost entirely to the exclusion of protein.

Senator Mondale. Protein is expensive.

Dr. Lipscomb. It costs money, sure.

Senator Mondale. The cheap items are carbohydrates, and the expensive things are proteins. So, when you find poor people, as you point out in your testimony, they are ashamed of their diet. Mothers know the difference, and they don't want you to know what kind of diet their children are eating, or that they missed breakfast or lunch. The truth is that they can't afford protein.

Dr. Lipscomb. A family has to feel pride in what it does. We found people who said, "Sure, I give my family meat; they are eating well enough." But physical examinations of these people revealed otherwise. The Valley farm laborers are simply not getting enough protein. Dietary deficiencies were confirmed in the presence of extreme obesity due to a predominantly carbohydrate diet and associated changes in hair, skin, and nails; winging of scapulae in children, wasted muscle mass, and lassitude. These conditions were manifest throughout the population we saw.

There were cases of ariboflavinosis, rickets, and pellagra. I belive the Rio Grande Valley is the only place, short of parts of Mississippi and some Indian reservations, where classic endemic nutritional diseases are still present in this country.

Two nutritionists with us, Dr. Buford Nichols and Dr. Andrew McMahon, who made an earlier report to this committee, led us through the McAllen area saying, "Let us now show you the ariboflavinosis and rickets, and the bleeding of the swollen gums." It was regrettable that such "rare" diseases could be illustrated in this fashion, but that is the way we learned.

5. NEOPLASTIC DISEASE

Neoplastic disease was not frequent. It was not likely that a primary diagnosis of malignant disease was made in any person. Papanicolaou smears of cervical mucosa in 27 women failed to reveal malignant change, though bacterial and mycotic infections were common.

Basal cell carcinomas of the skin were suggestive on several older individuals with heavy actinic exposure. We did examine three patients who were known to have malignant disease, one of whom had been treated intensively for lymphosarcoma and was in a terminal state. Prostatic carcinoma, resected carcinoma of the stomach, and a number of breast malignancies which had been operated were seen.

6. TRAUMATIC INJURIES

Traumatic injuries were common. Head injuries, injuries to the cervical and lumbar spine, and thoracic injuries, resulting in fractured ribs, were seen or confirmed on X-ray. Dr. Wheeler, too, has referred to the high incidence of such injuries among migrant workers. It was remarkable how few persons had received what would be considered adequate followup care.

7. CONGENITAL LESIONS

Congenital lesions in the form of harelip, cleft palate, pilodinal cysts, and congenital cataracts were noted with some regularity. Two children had congenital cataracts, the etiology of which was not known. Four children with congenital strabismus, or crossing of the eyes, were seen. We were disturbed by the fact that one child with a cleft palate which had not been operated had experienced continuous feeding problems, including reflux of food and liquids through the nose, for 6 years of life.

8. DEGENERATIVE DISEASE

Degenerative disease in older persons was common, including arteriosclerotic heart disease, arteriosclerosis obliterans, and osteoarthritis, particularly of the hips, knees, and hands. Degenerative and actinic changes of the skin were often associated with small, basal-cell carcinomas which we could document by clinical examination, but which were not biopsied.

9. DENTAL PROBLEMS

Dental problems existed in every individual we examined. These included advanced dental caries, pyorrhea alveolaris, and other evidence of periodontal and root-canal disease. This was a most depressive finding.

In our nutritional survey we mentioned the bleeding gums associated with scurvy. Because it is painful to chew harder foods, the person suffering from scurvy changes to a fairly soft diet. He begins to have erosion of the teeth and infection of his gums; the end result being loss of teeth. We saw minimal filling of teeth and no dental prosthesis (false teeth, bridges or braces).

Senator MONDALE. You say you didn't find a single person who didn't have dental problems?

Dr. LIPSCOMB. That is right.

Senator MONDALE. Not a single person?

Dr. LIPSCOMB. You are correct.

10. SPEECH, HEARING, VISION

Speech, hearing, and vision defects occurred frequently, especially in children. Congenital and acquired strabismus and cataracts were seen, and the survey team was impressed by the high incidence of hearing loss in children with chronic ear infections which had been untreated.

It would seem, in America today, that it would be relatively simple to take a child with an earache to a physician. If the child's eardrum is distended, retracted or red, if there is swelling on one side of the neck or a fever, penicillin or one of the broad spectrum antiobiotics will usually correct this problem in a short time. When treated early with antibiotics for otitis media, the child will generally recover without permanent damage.

We made a point of having the medical students with us do hearing studies on every child with a perforated eardrum. We found a continuing series of children with chronic untreated otitis media who had perforated eardrums. Their ears were still draining pus or had healed with perforations. Lack of treatment resulted in hearing loss.

There is no question that the learning problem is greatly compounded when a child who has perhaps no choice where he sits in a classroom is not aware that he cannot hear or that he cannot see well enough.

11. MENTAL, EMOTIONAL, DEVELOPMENTAL, AND LEARNING DISORDERS

Mental and emotional disorders were common, though difficult to assess during our brief examinations. Developmental, behavioral, and learning disorders were also difficult to diagnose. In some cases when we saw children far behind in school, we were able to document previously unrecognized hearing loss or loss of visual acuity.

GENERAL OBSERVATIONS

From the combination of histories and physical examinations, coupled to laboratory results, X-ray studies and our overall clinical impression, the following general observations can be made:

1. Malnutrition in adults, particularly the aged, and in growing children and infants, was commonplace. This was manifest clinically by the presence of rhagades, chelosis, hyperkeratosis, night blindness, keratitis, blapharitis, photophobia, and skin lesions resembling those of and exfoliative dermatitis. These observations confirm and extend earlier findings by the "Select Study of Human Nutrition" made in this same community 2 years earlier. Evidence of vitamin A, D, and B complex deficiencies were clinically observed.

2. Chronic skin disease, including superficial fungal infections, impetigo, and exfoliated dermatitis occurred in a number of patients. Many of the older individuals who had worked in the sun most of their lives had multiple superficial skin tumors, several of which were thought clincially to be basal-cell carcinoma. We did not see lesions of squamous cell carcinoma.

3. We found a high incidence of visual and hearing loss, particularly in the aged and in school aged children. Growing evidence suggests that hearing loss in children, arising from untreated or inadequately treated otitis media, may serve as a "tracer" disease which reflects inadequacy of health care. For this reason, the National Science Foundation has inaugurated a long-term study of hearing loss.

4. Intestinal parasitism was extremely common and had, in most instances, never been treated, except with home remedies by "curanderos."

5. Metabolic disease, including diabetes mellitus and thyroid disease, was frequent. We were impressed by the number of palpably enlarged thyroids representing endemic goiter.

6. Invariably, mothers suffered from the "multiple pregnancy syndrome," which includes chronic anemia, weakness, and in many cases, unrepaired cervical lacerations. This is an empiric syndrome which is diagnosed retrospectively in a mother experiencing multiple births over a short span of time. Although the "multiple pregnancy syndrome" is largely an intuitive diagnosis, it was commented upon repeatedly by the examining physicians.

7. One of the most disturbing aspects of our survey was the neglect of dental hygiene and proper oral care. Furthermore, in the presence of this destruction of teeth and gums, there was little evidence of repair of carious teeth and prostheses were not in use. Pyorrhea alveolaris was common.

8. We saw uncorrected congenital deformities which would have responded well to appropriate surgical therapy.

9. Rehabilitation of persons with nerve injuries, fractures, and strokes leading to hemiplegia and hemiparesis was unknown. Not one single individual with a residual impairment of gait or motor function had enjoyed the benefits of rehabilitative care, aside from that associated with return to work at a lower level of productivity.

10. We saw patients with a history of seizures. During our clinic visit, one young man of 16 had a grand mal seizure which started as a Jacksonian march, suggesting localization, but no prior neurological workup had been performed.

11. Multiple back deformities were seen, including scoliosis and kyphosis, occasionally due to injury, but in a number of cases no explanation was forthcoming as to the cause. Undiagnosed back, hip, and lower-extremity pain was a common sympton in the young, but was difficult to document on physical examination. Symptomatically, this pain resembled that of degenerative osteoarthritis, usually found in older people.

12. Active pulmonary tuberculosis was revealed by X-ray, as well as sarcoidosis, a pulmonary disease of uncertain etiology.

13. Degenerative diseases of the heart and great vessels was widespread, as was hypertension.

14. Anemia was not a common finding in these individuals. When it was observed, it usually could be ascribed to a combination of iron deficiency, protein malnutrition, and intestinal parasitism. The "multiple pregnancy syndrome" also may have contributed to some of the anemia we observed.

In this recounting, it is difficult to convey the overall impression of our group in an objective fashion. Four consecutive days of an unceasing parade of illness, deformity, disability, and human suffering exerted a profound and demoralizing effect upon us. While we had reason to question the wisdom of having brought students with us, the response to this experience was as pronounced in older physicians as in young medical students.

The migrant workers whom we examined represent a marginal group which is, for the most part, beyond the influence of American health care. In a nation where levels of specialty care in medicine have achieved laudable heights, this group has not yet found its way to our most rudimentary facilities. Such simple necessities as glasses, false teeth, braces, hearing aids, dental repair, rehabilitation, repair of congenital deformities, maintenance of simple hygiene, and repair of cervical lacerations following childbirth, this population—uniquely—seems to have never attained. The specialties of plastic surgery, obstetrics and gynecology, pediatrics, surgical ophthalmology, and otorhinolaryngology have no meaning to the poor, for they have never had access to this level of professional treatment.

The health survey team would wish to stress once more the relative ease with which we were able to document the presence of disease, and the absolute impossibility of ascribing cause to these conditions. This is an important distinction, for if we are to correct such conditions, we must know and understand where the defect lies.

If medical and dental care is too expensive, we need to know of this. If sociocultural barriers exist, we need to learn to work within these limits. If religious ethic prevents planned parenthood, we need to find ways to reasonably approach such strictures. If there are injustices and cruelties which prevent the acquisition of food, transportation to and from health facilities, and entry into hospitals, we need to take steps to remove these barriers.

Of one fact we have become convinced. If we make significant advances in the delivery of health care to the poor and do not change the social environment in which they live, including food, clothing, housing, education and sanitation, we will have done little to change the fundamental situation. Because the major causes of these manifold social ills are largely economic in nature, any effort we make must be tempered with an understanding of the deficiencies of our entire social structure, which tends to punish, selectively, the poor of our society.

If this committee addresses itself only to medical care problems, specifically the doctor-patient relationship, and fails to grasp the complexity of the deficiency in the total life style of this population, then our myopic attempts to achieve good health care will fail.

Senator YARBOROUGH. Doctor, will you yield a moment at this point? Among these other problems, of course, has been the language barrier. When I introduced in January of 1967 a bilingual education bill, I was amazed to find that that was the first bilingual education bill ever introduced in either branch of the Congress. We passed it that year.

There again the law is on the books, but we have had a constant effort by all administrations in power since then to pull down the moneys appropriated. We finally have authorization this year of $30 million. For a year we could not get any appropriation, then the Bureau of the Budget and administration recommended $5 million and then $10 million. It has been tokenism.

Last year we got that appropriation up to $21¾ million. This year we brought it up, the administration recommended $21¾ million. We got it up to $25 million in the Appropriations Committee and $30 million on the floor.

This is a question that has been previously raised here by Dr. Wheeler, why isn't something done about this? This committee, with its aid on the floor, passed this summer these matters by unanimous vote of the Senate. But when we get down to the administrators, strangely the Office of Education gave no help, they opposed this bilingual educational bill. The Bureau of the Budget cuts back constantly on health and education, and last year in questioning them I found that there is not a single trained health professional or trained educational professional in the whole Bureau of the Budget with 178 hearing examiners passing on the budget of the United States.

So, we have problems there. The office of the Bureau of the Budget is not health and education-oriented. It is not only not health and education-oriented, but out of the professionals covering all the departments and branches of the Government, they had as of last year not hired one health or educational professional.

Dr. LIPSCOMB. After examining a child who had a 60 percent hearing loss in one ear and 40 in the other, one of our medical students said, "If you are born poor in America, that is bad. If you are dark skinned and speak another language, that is even worse. If you are a migrant and don't have a place to call home, that is a greater tragedy. And, if you are sick, blind, or hard of hearing too, there is no way you will ever become part of life in America today."

The poor do not envision a place for themselves in the affluence that surrounds them. It is left to us to put up the grubstake to get them started. Our first task is to help them attain good healh and adequate living conditions—the barest needs of all human beings.

In an attempt to achieve objectivity in this report, charges will be linked to suggestions for change. I believe that there is probably no more dedicated a group of people in the United States than those who devote their life to the care of the sick. I say this as a personal bias. They work longer hours, and they are dedicated, these 200,000 physicians. They give, to the best of their knowledge, good care to the patients whom they see. We now know beyond any doubt, however, that there are large numbers of Americans whom physicians never see and can never really know about until they become visible, as did the sick and injured in McAllen.

I feel that physicians and other health providers are individually responsible for a form of apathy and indifference which is generated by long association with illness. Each physician must retain his sensitivity to illness and its effect on the community as a whole. He must be willing to stand up and call attention to urgent local health needs. It requires courage and ingenuity to refuse to tolerate these conditions. The physician and his colleagues must search for ways to more effectively participate in community health programs.

Furthermore, it must be said that in every poor community I have visited in the past 2 years, the physician's primary or follow-on fee constitutes the most important barrier, in the minds of the poor, to seeking early medical help.

Senator Mondale. In other words, the poor are afraid they will have to pay a fee, which they will, so they stay away?

Dr. Lipscomb. This is the reason I again say that entry into our health care system is the initial hurdle, and we must find a way to help them overcome it.

Throughout county, State, and national medical associations, physicians, both black and white, are responsible for failing to exert leadership in the development of health care programs which would bring resolution to these problems at a local level.

Within the borders of Texas and California we were witness to a large unimmunized population. There is a constant influx of bacterial, viral, and parasitis diseases to the United States.

Senator Mondale. Would you say that the desperately poor people that regularly cross our borders from Mexico into the United States are a major factor in defining the health problems of this area?

Dr. Lipscomb. I personally believe this to be true. It is my understanding that two of the contacts for the recognized cases of polio in the valley were associated with polio exposure across the border in Reynosa.

Senator Mondale. We have tried in every possible way we could to get the attention of the Federal Government concerning the enormous significance of the unrestricted border crossings. It affects wages, it affects the opportunity and ability for union or community organization, it affects housing, it affects education. Indeed, perhaps the single most important source of the migrant stream is the border crossing between Mexico and Texas and California and all its attendant problems. There is absolutely no interest in this Government to do anything to correct the situation.

They have attacked the marihuana problem, but there are human problems that you have just described which are undoubtedly the worst in America today, and we have received no interest at all from the appropriate executive branches of Government. I went down there, myself, to a border crossing point at 5 in the morning. I nearly got arrested just because I was so interested in seeing what was really happening.

I found that over 40 percent of the people crossing the border, and there were hundreds of them, produced birth certificates which in my opinion were probably phony, at least many of them were phony. Yet in hearings during which I asked the appropriate Federal agencies to look into this fact, I never got a sufficient answer.

Yet this is a walking poverty program that is producing poverty by the hundreds of thousands. This is possibly why you have a large Florida migrant population that is getting worse off, not better, because people are so desperate in southern Texas that they are moving to Florida. They also move to California.

I don't see how we can beat the farmworkers problem until at least there is some rational policy at that border, because there is an unlimited supply of tragically poor, unskilled, impoverished and as you point out, unhealthy people in Mexico seeking some better life in this Nation. And I want to make it absolutely clear that I have nothing against the poor people of Mexico. Maybe we should have a national policy like we do with Cuba, to take all their poor and their welfare recipients. Maybe we should.

But let us do it right if we are going to do it. Right now it is the poor migrant, the poor Mexican-American who is paying the price, this awful price, along our southern borders where we have a depression economy. It is still "Grapes of Wrath." It is still "Harvest of Shame."

The implication you put on this influx is that it is a walking source of poor health for America. If you can get the attention of the appropriate agencies, you are better than I am.

Dr. Lipscomb. Certainly, preventive measures and immunization are crucial issues in Hidalgo and Starr Counties. The polio epidemic has focused attention on the need for a protective effort by county and State health departments, particularly along the border.

I feel that elected officials, specifically county judges sitting on commissioners' courts or in other vital administrative positions, control the solicitation of State and Federal funds, and, more importantly, how these moneys are spent in their counties. I have been in several rural areas where the county judge virtually rules a satrapy. He regulates the flow of money and its distribution, particularly as it relates to welfare, road building, and funding for beds in State hospitals. This man holds the key in any preparations for local programs.

When legislation is passed in Washington, something has to happen at a local level. The moral responsibility and sense of obligation the county judge feels can influence how local and Federal funds are reallocated and distributed in his community.

Senator Saxbe. Right there I think you have put your finger on the trouble we have in Washington. One thing we learn from what Senator Yarborough said is that you can't cure these problems by money alone, because we have $15 million a year going into this health care in these migrant labor camps and yet we have this situation of no medical care or very little.

I have the feeling that if we did have unlimited funds without local participation, we still could not cure the problem. The indifference at the local level, and this is true of every State where we have these migrants—the indifference is so great that if we try to do it from Washington without the cooperation at the local level, we are going to spend millions and millions of dollars without accomplishing what we are trying to do.

The local judge you talk about in Mississippi and Alabama is interested in getting that man to leave to come to Washington, to come to New York, to come anyplace else but his county, because he is no longer an asset. His work is no longer needed. He is unskilled, he can't run a tractor, his health is poor, maybe he is old.

So, anything that would make him healthier there and keep him there, they are not interested in. I know there are compassionate people, but compassion is lacking in most of these situations. I know from my experience in Ohio many of the growers are interested in having that man available. In fact, they will invite him in, knowing they will need only half of what are recruited, so that there will be a surplus of labor when he needs them.

When that labor is over, he is indifferent to what happens. Now unless local people, and this is true of your physicians that you talk about—unless the medical association, unless these people at the local level are interested in solving this problem, it is like trying to push a truck up the hill with a tow rope when you just push money in from Washington without any cooperation or interest at the local level.

Senator MONDALE. Would you yield there?

Senator SAXBE. Certainly.

Senator MONDALE. I think that Senator Saxbe is right if we do it the way we are doing it now. Every time we want to help the migrants, the first thing we do is hire a bunch of white middle-class people, and we give them the money. But, the white middle-class people lack the interest and the commitment to do the job. At least our zero record of progress indicates such.

This is what we saw in that migrant health program in McAllen, Tex., which is the target area you are talking about. Dr. Casso has treated more people on his own free time than has that migrant health program. We have to get over this paternalism and start funneling money into the hands of those who need the help, and they will do a lot better job of getting help than we can do for them.

Now I am absolutely convinced that in that migrant health program, if it were run by the migrants themselves, they would have spread that money much further, and far more efficiently. They would have had paraprofessionals, they would have probably hired returning medical corpsmen, they would have had an Outreach program and at least they would have been able to speak Spanish. And most of these health problems you are talking about are not difficult, they are not expensive to resolve. It is a question of the concern of the people in charge of the programs, and the concern of Outreach workers to make the programs work.

Dr. LIPSCOMB. At least 90 percent of the diseases which we saw are treatable.

Senator MONDALE. It is an inexpensive program, but all of our programs paternalistically assume a concern by people who are not in the target population. So long as we proceed in that way as we have seen with the Indians, as we have seen with the migrants, as we have seen with any other powerless population in America, they are not going to get the help.

I think that is fundamental to defining the problem and finding solutions. Put the funds in the hands of those who need the help. They will do fairly well. There is one thing we have been unwilling to do; let them have power over their own lives. Paternalism is not working, and won't work.

Senator SAXBE. I don't go all the way with that, because I know and you know from the OEO experience that when you are dealing with people who are in many cases children, because they lack educational opportunities or they have been dogged by poor nutrition, they have extreme difficulty in trying to run a business organization, which is what is required.

They make mistakes, we are critical. This has happened in our model cities. They wind up in jurisdictional fights and jealousies. To an extent, yes, we can do this. We can channel the money through the subjects. but if we think that we are going to get good business practices and we are going to get more for our money, I seriously question whether that is going to be forthcoming.

The program needs a combination of these things. The people don't always operate for their own good. They don't always do the things that are the best business practices. There are a great many weaknesses that exist in all levels of our populations. So when they do go wrong, everybody points a finger and says, "I told you so, they are not interested in bettering themselves. A few take advantage of it," and so on.

We have heard it all on the model cities and some of these other ambitious poverty programs. A few benefit, a great many don't. So, there is no simple solution.

I don't believe that we can tell people that everything would be rosy if we just funnel it through these people.

Senator MONDALE. I am sure this is not the morning for a great debate, but I think there is enormous strength in the poor. I think most of them are a lot brighter than we believe. Most of them are far more compassionate and, surprisingly much more patriotic. They very much want to be a part of this country. They know about poor health. They don't have to be brainwashed to know about hunger.

Our programs and systems are too often conceived and almost always operated by those who are aloof from the need, and they don't work. This includes the model cities program. That is not an example of local control. There are so many Federal, and State, and local strings on that model cities program that I think one of the reasons for the frustration is that a community elects an advisory board and once they are empaneled, they find they don't have any power at all. They are token leaders. All they are asked to do is deliver bad news to the folks.

I am sure, and I hope Dr. Casso will comment on this when he testifies, that if the health program were directed by an elected board of migrants from the four-county area in the Rio Grande Valley where the migrant health program presently operates, the delivery of services, the effectiveness of Outreach, the sensitivity of the program would be enormously improved per dollar over what we have today.

You might comment on this, Dr. Casso. This is the doctor who lives in the middle of all of this.

Dr. CASSO. In my opinion that is correct, Senator. It seems like the migrant health funds are very limited, to begin with, in my area. It amounts to about $9.96 per migrant per year. When we compare that with the national average of about $250 per person for health care, that is a tremendous difference.

Now when you funnel these limited funds through the hierarchies of public health and so on, by the time this money trickles down to the migrant, you find that it is a very, very small amount that actually gets to him in the form of health care services.

Senator MONDALE. As a matter of fact, it takes all the genius that we have to know how to get a dime out of the dollar down there.

Dr. CASSO. That's right.

Senator MONDALE. By the time it works its way down the bureaucratic chute, there is little left for the people that are supposed to benefit.

Senator YARBOROUGH. Dr. Lipscomb, I saw a ray of hope in January for Hidalgo and Cameron Counties, the two Lower Rio Grande Valleys of Texas out of which 10 percent of all the migrant farmworkers of Texas come, because in the primaries this year there were nominated persons of Mexican-American extraction who ran on platforms of concern for the poor.

For the first time in the history of those counties county judges will be inaugurated in Cameron and Hidalgo Counties of Mexican-American extraction. I think there will be some changes in that local food distribution and more active concern there.

You talk about people crossing the border. I assume that refers to the "green carders" more than anything else, the green card by which a man can take that card and go as far north as Dallas and Kansas City without becoming a regular resident of the United States. It has a depressing effect on wages as far north as Kansas City and St. Louis.

Now there are past examples of the cooperative effort with the Mexican Government to eradicate disease. It can be done. I refer to the hoof-and-mouth program and the screw-worm eradication program, but they both deal with diseases of livestock.

Now what we need is that same concern for human beings that we have shown for the health of livestock, in the screw-worm eradication program and hoof-and-mouth disease eradication program.

We know we did have cooperative agreements with Mexico and we have hoof-and-mouth disease eliminated. You have to be on guard. The screw-worm incidence has been reduced to very minimal. There is a constant guard to keep that from breaking out.

This shows it can be done with Mexico.

Dr. LIPSCOMB. It has been said that our racehorses, dogs, and cats receive more attention than is given to the poor of the valley.

It is indeed difficult to balance the administration of Federal funds with the desire of the poor to have a voice in their program. There is no easy answer, but it seems to me that any time a white person dealing with the blacks or an Anglo dealing with Mexican Americans comes in and says, "We will help you do this," there must be a self-limiting factor in which he also says, "At the end of a certain period, I will get out and you will run it yourself."

I believe that hospitals, operating as nonprofit, tax-exempt corporations, both public and private, have failed to exercise innovation and courage in the development of community programs which would reach out to the poor and almost poor, and eliminate such deterrents as the means test.

Moreover, the Federal Government, through well-intentioned legislation, has in some cases created absolute barriers to better health care. A recent case in point involves Medicare legislation which requires that registered nurses be on duty on all shifts in hospitals receiving Medicare funds. This has recently resulted in the closing of at least six hospitals serving the Rio Grande Valley, which, while giving limited health care, nevertheless provided a critical service for the migrant worker and his family. In addition, medicare legislation does not specifically pay for immunization for migrant workers. As a consequence, we are now reaping the harvest of this shortsightedness in our current polio epidemic.

Many corporations in our country have placed self-interest too far above community concern and have failed to exert that leadership which their economic strength allows. For example, insurance carriers have set patterns for health care compensation which have encouraged over-utilization of hospitals, and subsequently increased the initial cost of insurance premiums. Medical insurance coverage is prohibitive for the poor and the almost-poor as well.

The renewed attempts of the valley migrants to unionize may provide them the strength to bargain collectively to force such issues as fair wages, decent living conditions, and adequate health care insurance. The recent pressures to develop a form of national health insurance and group, prepaid health coverage may provide one direct—and overdue—remedy for these injustices. I would hope to see an enlightened national health insurance program come before Congress and be acted upon.

Senator SAXBE. Aren't you there increasing the demand without increasing the ability to serve that demand?

Dr. LIPSCOMB. It is cheaper in time, life, human suffering, and money to prevent disease. I believe that we need to devise and operate new health care centers which not only provide crisis-oriented emergency care for the critically ill, but also make preventive treatment feasible for the well, worried well, and early sick.

Senator SAXBE. What I mean is——

Dr. LIPSCOMB. I see your point. You are wondering, if we make it easier for them to enter the present system but do not change the whole structure of health care delivery in America, then will we have flooded an already inadequate system.

What is the crisis in American health care? We do not have enough doctors, enough nurses, enough dentists, enough hospitals, or enough money. Dr. Peter Warter, an official of a major corporation, noted that there is a ratio of 200,000 physicians to 200,000,000 people in this country, and that $63 billion per year is spent on health care. He observed that the same physician-to-populace ratio exists in a model health care scheme on the West Coast. However, this prepaid medical coverage gives across the board minimal care for $100 per person, per year.

Senator SAXBE. Are you referring to the Kaiser program?

Dr. LIPSCOMB. Yes, sir.

Senator SAXBE. Isn't that about $400 a year?

Dr. Lipscomb. Now the recent figures suggest that the average cost per individual for group prepaid health care is $100 to $200 annually for each of the 2 million participants. The cost of this health care package, if it were extrapolated to our whole population, would come to approximately $20 billion per year, which is a third of what we are spending for health care.

Perhaps, as Dr. Wheeler has said, the problem is not so much the shortage of doctors, personnel, and facilities, but the unequal distribution of the population and capital in our country.

Certainly every medical school in this Nation must plan to increase the number of its students. We must begin to train paramedical personnel and physician assistants. Even then, the impact of these measures would not be felt for 10 or 15 years.

In a wholly different vein, and, perhaps, to move the cynic, a pragmatic approach to the nutritional and health problems of the poor may have greater import than an appeal to altruistic sentiments.

What we are doing to the poor in America today is simply bad business.

We are losing valuable man-hours of productive labor by allowing this human wastage to continue. This is supported by a recent study (Correa and Cummins, Am. J. Clin. Nutrition; 23:560–565, May 1970) which demonstrates that increased caloric consumption accounted for 5 percent of the growth of the national product in nine Latin American countries—a contribution nearly as great as their educational programs. We have failed to conduct the business of the Nation in a businesslike fashion.

The findings described here are not limited to the Rio Grande Valley, to the Mexican-Americans, or to the migrant workers. Disease of this magnitude can be seen in the ghettos of American cities, and in rural areas throughout the Nation. I would state emphatically that enough evidence is now at hand for us to roll up our sleeves and get to work.

[Applause.]

Senator Mondale. Thank you, Doctor, for a remarkable statement. You have made a most important contribution.

Senator Yarborough. If a person knew nothing about Mexican Americans except the statement here of their terrible health conditions and the poverty and malnutrition, they would not see a picture of the whole man. I have traveled among them for 18 years. They are wonderful people, as you have found. They are patriotic people.

They know their ills and they know that they are at the bottom of the totem pole in America among all of the ethnic groups.

Now the tragic thing about this is that financially the outlook for the migrants seem to be worse this year as the families are coming back to Texas and went to places they formerly worked and now have found there has been mechanization and the jobs in the field that were formerly there are not open. They formerly would go north and work in the harvest where they picked cherries in Michigan or harvested asparagus in Illinois or work in vegetable fields around the great cities in the North or in the sugar beet fields of Michigan and they would come back with enough money to pull them through the winter.

Now they are coming back with their jobs gone and the outlook economically looks even worse. That is a problem that needs to be considered, too.

In the interest of time I will forgo questions or further comments. I did have some. I want to thank you for this great contribution you have made. As a fellow Texan I honor you for the study you have made and for the report you have made to the Nation.

Thank you very much.

Senator MONDALE. Thank you, Senator Yarborough.

Senator Saxbe?

Senator SAXBE. This is general, but I know you have found some model migrant camps. We have some in Ohio where they have really made a good effort. We have some bad ones, too. But did you see a markedly different result where they did have adequate quarters and sanitation—I am talking about from the medical standpoint now.

Dr. LIPSCOMB. I asked Dr. Wheeler if he could answer, and he said he didn't see any.

Senator SAXBE. I visited one personally in Florida and they had nice quarters and a community house. They had seemingly regular employment there, however. That is, they had settled in there. From an outward observation, without any medical records, they seemed to be much better off. I just wondered if you had visited any of these.

Dr. LIPSCOMB. I did not visit any of them myself. It intuitively seems to me that they would be better. Someone might say, "You don't really know what helps the poor until you make a study." Let us make our next study a practical effort by setting up better ways to live.

Senator SAXBE. I will take you to one facility in Ohio which will give you a good observation of what can be done. It is due primarily to local interest.

Dr. LIPSCOMB. We know the figures of immunization, sanitation, elimination of tapeworms, pinworms, and hookworms are good figures to adopt in the elimination of malnutrition and disease. The models do exist. Now let us implement them.

Senator MONDALE. Dr. Lipscomb, I have only one question because it is now noon and we want to hear from the other witnesses. I gather from your testimony that while there was some concern shown toward mental health problems, that the field surveys here were principally restricted to the physical health problems. We have had witnesses before us, Dr. Coles from Harvard and others, who have given their opinion that it is almost impossible for a migrant child to grow up mentally healthy—that the rootlessness, the lack of a place to call their own, the constant movement, the rejection, the dullness and the boredom of work, the insults, the feeling of not being wanted, the total powerlessness to do anything about one's plight, the second-rate systems of education, the reality of grown boys sitting in a second-grade class, and other such insults produce a child with profound mental health problems. They say that these problems make it virtually impossible for such children to go through the system and come out mentally or physically healthy.

I think this is a dimension—the mental health problem—that should not be ignored. It is more difficult to quantify, but maybe its damage is even worse in some respects, if that is possible, than the physical problems to which you make reference.

Dr. LIPSCOMB. I think that a person who is poor, who is dark-skinned, who speaks another language, who is rootless, who is hungry, who may be sick, in addition, with iron deficiency anemia, subminimal diseases, and who still survives in our society as these people have done, is remarkable. I am constantly amazed that the poor of our Nation have been able to cope and survive. In spite of these obstacles, they have kept their resilience, culture, language, music, and ethos.

Senator SAXBE. Isn't that the history of all of us at one time in our history, though?

Dr. LIPSCOMB. Yes.

Senator SAXBE. I mean, most of us have come from a peonage or feudal system in Europe.

Dr. LIPSCOMB. Sure.

Senator SAXBE. We have survived because man is pretty tough.

Dr. LIPSCOMB. Yet in the Rio Grande Valley, these people are still living in a feudal system, and are suffering in the 20th century.

Senator SAXBE. Eighty percent of the world population survives as we have seen these people in the migrant camps survive. This is the tragedy of our civilization.

Senator YARBOROUGH. Mr. Chairman, I have one other comment.

Dr. Lipscomb, I agree with you if we just took a pragmatic approach, if we took a cold materialistic approach and didn't consider matters of humanitarianism or justice or anything else, just a cold dollars and cents approach, we would help this situation. It is better business, better in dollars and cents, better for the economic strength of the Nation.

It is wholly unintelligent to respond to this as we have, in my opinion. Even if we took no humanitarian attitude at all, it would pay this Nation to do this.

Dr. LIPSCOMB. The paper comes from the American Journal of Clinical Nutrition, and it outlines the economic advantages of providing food for hungry peoples.

Senator YARBOROUGH. I ask that be included in this testimony. Also, because of the interruptions, I will order printed in the hearing record at this point your full statement together with documents and materials that you have appended to it.

Senator MONDALE. Without objection, that will be included.

(The material referred to follows:)

PREPARED STATEMENT OF HARRY S. LIPSCOMB, M.D., DIRECTOR OF THE INSTITUTE FOR HEALTH SERVICES RESEARCH, BAYLOR COLLEGE OF MEDICINE, HOUSTON, TEX.

Senator Mondale, distinguished members of the Subcommittee, I am Harry S. Lipscomb, M.D. I am Director of the Institute for Health Services Research, Baylor College of Medicine, Houston, Texas, and member of the Citizens Board of Inquiry into Health Care Services.

You have requested that we tell you of the findings of a group of physicians who recently surveyed the health conditions of migrant and seasonal farmworkers in South Texas.

I do so with reluctance, because I am ashamed, as an American, of what we saw, and concerned, as a physician, that my colleagues and I have failed to act as leaders in the face of demonstrated need, to structure the delivery of our services so as to reach every man, woman, and child in our Nation. Dr. Wheeler has given a broad overview of what our team saw in Texas and Florida. I will now document our findings in the Rio Grande Valley.

From March 3rd through March 8th of this year, our health team examined patients in clinics and "barrios" of Hidalgo and Starr Counties, Texas. Histories and physical examinations were performed on 1400 individuals, the majority of whom were Mexican-Americans living in and around the city of McAllen, Texas. Our health team, which consisted of fifteen physicians, ten medical students, four technicians, and two nurses, saw patients from early morning until midnight for four consecutive days. On a limited number, we performed blood counts, urinalyses, chest X-rays, pelvic examinations, and stool cultures. Additionally, we collected drinking water from 8 "barrios" for bacteriological examination.

It had been our intention to examine 50 families in great depth, but were confronted on March 4th by over 900 people lining the streets around the small clinic in which we worked. We had intended to document, but not treat illness. Within the first hour it became clear that the people had come for treatment, and their manifest need was so overwhelming that we hastily arranged with a neighboring pharmacy to provide medications and vitamins. In four days we prescribed and administered in excess of $6,000 worth of drugs, which were subsequently paid for by the Field Foundation.

The region which we chose was selected in part because of an expressed need of the community and because of an earlier well-documented nutritional study, in the same region, reported to the Select Committee on Nutrition and Human Needs of the U.S. Senate (90th Cong., 2nd Sess., and 91st Cong., First Sess.: "Nutrition and Human Needs," part 3, the National Nutrition Survey, pp. 880–922).

Two years later, 15 months after the inauguration of the Surplus Commodities program, one year after the passage of the Migratory Health Act, little has changed. Disease and malnutrition and human suffering continue. This in the face of over $6 million in farm subsidies, significant civic improvements, new highways and roads, and new hospital construction assisted by Hill-Burton funding.

In short, the Mexican-American is still a disenfranchised person.

This report will simply describe what we were able to document from our clinical impressions, X-rays, and other supporting laboratory data. It would be impossible to identify a specific cause for many of the conditions: We will describe a child with a cleft palate which has not been surgically repaired, a patient who needs glasses and has not gotten them, a mother with cervical infection who has not been treated, or a person who has not had adequate dental care, which all constitute documentable evidence of disease. On the other hand, that these conditions have occurred, or have not been remedied may be ascribed to ignorance, to lack of awareness, to lack of availability of services, or to economic barriers which cannot be identified, in all cases, with certainty. We simply cannot link disease to the reason for the disease except in a few isolated instances. We would like to say that all the malnutrition which we saw was due to an inadequate commodity program in Hidalgo County, or that poor dental care was due to a limited number of dentists and the high initial cost for care, but I do not believe that a survey of this sort can be so used. For every case of health hardship we saw involving lack of physicians or inadequate funds or improper food, we saw a balance of patients who, for sociocultural reasons or lack of educated health "awareness," *failed to seek* care. Perhaps in the culture of poverty, failure to seek reflects the hopelessness of poverty, the apathetic despair of a culture which has done without for so long that even the aspiration for care is lost. This very apathy and despair which has characterized every poor community I have visited is, unfortunately, used as evidence that the poor will not avail themselves of our services if they are provided. I believe the overwhelming turnout of the people of the Valley to our accessible clinic gives the lie to this popular misconception. These people are *hungry* for care. They are dying for want of it.

In analyzing the results of our study, we have been able to classify the conditions which we saw into the following categories.

1. Infectious disease:
    a. bacterial
    b. viral
    c. spirochaetal
    d. fungal
    e. parasitic
2. Toxic disorders
3. Metabolic disease
4. Nutritional disease
5. Neoplastic disease:
    a. benign
    b. malignant

6. Traumatic injury
7. Congenital disease
8. Degenerative disease
9. Dental disease
10. Speech, hearing, and vision defects
11. Mental, emotional, developmental and learning disorders

1. INFECTIOUS DISEASE

The *bacterial* infections which we observed included otitis media, bronchitis, laryngotracheobronchitis in children, conjunctivitis, uveitis, acute and chronic follicular tonsillitis, pyelonephritis, cervicits, urethritis, and impetigo. Associated inflammatory conditions, perhaps of non-bacterial origin, included cholecystitis, gastritis, and esophagitis. In regard to hygiene, we found nursing mothers with mastitis, and on two occasions we examined bottles of milk for infants, which were contaminated and the milk soured. *Viral* diseases were common and many children and entire families were suffering from upper respiratory infections. A number of communicable childhood diseases were seen including rubella. It is of some significance that shortly after we left, an epidemic of poliomylitis occured in the Valley resulting in three deaths. This is the only poliomyelitis reported in the United States in 1970. If it is reasoned that the open border into Mexico is an open seeding source, then our very protection lies in immunization. In this population we have failed to provide this protection. A number of patients were reported to have syphilis and this was confirmed by serology. Fungous infections were common, particularly monilial vaginitis, stomatitis, and tinea corporis. Chest X-rays revealed the presence in at least three individuals of healed histoplasmosis, and at least two cases of previously undetected active pulmonary tuberculosis were discovered. Sarcoidosis, a disease of uncertain etiology, has been linked to some of the respiratory fungal diseases. *Intestinal parasites* were the rule. We personally saw under the microscope pin worms, hook worms, round worms, and amoeba, often occurring in combination in a single patient, and invariably occurring in several members of the same family, when present in one. Of the eight drinking-water sources which we cultured, six were contaminated with fecal organisms. (See picture in text showing two old oil barrels serving as water reservoir for four families—23 people.) Cramped living quarters combined with contaminated drinking water virtually assure the spread of any communicable or parasitic disease.

2. TOXIC DISORDERS

We have reason to suspect that a certain percentage of the migrant workers were exposed to toxic materials, notably pesticides used in the agricultural industry. Acute pesticide poisoning is easily diagnosed. We saw no evidence for this. On the other hand, many patients gave us a history of having been sprayed or been in fields shortly after a rain at which time they suffered numbness and tingling of hands and feet, and many described a seasonal skin rash associated with the use of pesticides, notably organophosphorus compounds and chlorinated hydrocarbons.

3. METABOLIC DISEASES

Metabolic disease in this population included diabetes/mellitis which occurs in high incidence in the Mexican-American. We feel that the examination of urine alone, while relatively unsatisfactory as a diagnostic procedure, uncovered 14 patients with previously undetected glycosuria. These patients must now be studied with glucose tolerance tests to confirm the presence of diabetes. Thyroid disease was common, and several cases of thyrotoxicosis were observed and at least two cases of hyxedema (thyroid deficiency) were seen. We were impressed with the palpably enlarged thyroid glands. The McGanity report had earlier emphasized the presence of endemic goiter in this population, and this we confirmed by clinical examination. It is not absolutely certain that the genesis for this is iodine deficiency alone. The possibility exists that this population may have a diet that is itself goiterogenic.

4. NUTRITIONAL DISEASE

Nutritional disease was common and consisted primarily of protein malnutrition. Caloric malnutrition was not seen, and the pathetic wasting of prisoners of war and individuals in certain far eastern countries was absent. On the other hand, extreme obesity due to a predominantly carbohydrate diet and associated changes in hair, skin, and nails reflected significant protein malnutrition. It is a point of pride among the people that they claim to provide meat for their families, but the physical manifestations of protein malnutrition seen in the children do not support this contention. We suspect that meat, like milk, is only available on post-pay weekends. Vitamin deficiencies were extremely common. Evidence of ariboflavinosis, rickets, and pellagra were confirmed by the two nutritionists with us, and painful chewing and swollen bleeding gums suggestive of scurvy were seen in several children.

5. NEOPLASTIC DISEASE

Neoplastic disease was not common. It is not likely that we made a primary diagnosis of malignant disease in any person, and the Papanicolaou smears of cerivical mucosa in 27 individuals failed to reveal malignant change, though bacterial and mycotic infections were common. Basal cell carcinomas of the skin was suggestive on several older individuals with heavy actinic exposure. We did examine three patients who were known to have malignant disease, one of whom had been treated intensively for lymphosarcoma and was in a terminal state. Prostatic carcinoma, resected carcinoma of the stomach, and a number of breast malignancies which had been operated were seen.

6. TRAUMATIC INJURIES

Traumatic injuries were common and head injuries, injuries to the cervical and lumbar spine, and thoracic injuries, resulting in fractured ribs, were seen or confirmed on X-ray. It was remarkable how few of these had received what would be considered adequate follow-up care.

7. CONGENITAL LESIONS

Congenital lesions were seen with some frequency. Most commonly, harelip, cleft palate, pilodinal cysts, and two children were seen with congenital cataracts, the genesis of which was not clear. Four children with congenital strabismus were seen. We were disturbed by the fact that one six-year-old child with cleft palate had not been operated, and had experienced continuous feeding problems, including reflux of food and liquids through the nose.

8. DEGENERATIVE DISEASE

Degenerative disease in older individuals was common, including arteriosclerotic heart disease, arteriosclerosis obliterans, and osteoarthritis, particularly of the hips, knees and hands. Degenerative and actinic changes of the skin were often associated with small, basal-cell carcinomas which we could document by clinical examination, but which were not biopsied.

9. DENTAL PROBLEMS

Dental problems existed in every individual we examined. These included advanced dental caries, pyorrhea alveolaris and other evidence of periodontal and root-canal disease.

10. SPEECH, HEARING, VISION

Speech, hearing and vision defects were common, particularly in children. Congenital and acquired strabismus and cataracts were seen, and the survey team was impressed by the high incidence of hearing loss in children with chronic ear infections which had been untreated.

11. MENTAL, EMOTIONAL, DEVELOPMENTAL, AND LEARNING DISORDERS

Mental and emotional disorders were common, though difficult to assess during our brief examinations. Developmental, behavioral, and learning disorders were also difficult to assess, but we commonly saw children far behind in school, in some cases in which we were able to document previously unrecognized hearing loss or loss of visual acuity.

From the combination of our history and physical examination, coupled to the laboratory and X-ray studies and our overall clinical impression, the following general observations can be made:

1. Malnutrition in adults, particularly the aged and in growing children and infants, was commonplace. This was manifest clinically by the presence of rhagades, chelosis, hyperkeratosis, night blindness, keratitis, blapharitis, photophobia, and skin lesions resembling those of an expoliative dermatitis. These observations confirm and extend earlier findings by the "Select Study on Human Nutrition" made in this same community two years earlier. Manifest evidence of vitamin A, D, and B-comples deficiencies were clinically observed.

2. Chronic skin disease, including superficial fungal infections, impetigo, and exfoliated dermatitis occurred in a significant number of patients. Many of the older individuals who had worked in the sun most of their life had multiple superficial skin tumors, several of which were thought clinically to be basal-cell carminoma. We did not see lesions of squamous cell carminoma.

3. We found a high incidence of visual and hearing loss, particularly in the aged and in school-aged children. Growing evidence suggests that hearing loss in children, arising from untreated or inadequately treated otitis media, may serve as a "tracer" disease reflecting inadequacy of health care. For this reason the National Science Foundation has inaugurated a long-term study of hearing loss.

4. Intestinal parasitism was extremely common and had, in most instances, never been treated, except with home remedies by "curanderos."

5. Metabolic disease, including diabetes mellitis and thyroid disease was frequent, and we were particularly impressed by the number of palpably enlarged thyroids representing endemic goiter.

6. Invariably, the mothers showed evidence of the "multiple pregnancy syndrome," which includes chronic anemia, weakness, in many cases, and evidence of unrepaired cervical lacerations. This is an empiric syndrome which is diagnosed retrospectively in a mother with multiple births over a short span of time. This is largely an intuitive diagnosis, but was commented upon repeatedly by the examining physicians.

7. One of the most disturbing aspects of our survey was the evidence of neglect of dental hygiene and proper oral care. Furthermore, in the presence of this destruction of teeth and gums, we saw little evidence of repair of carious teeth and no evidence of prostheses. Pyorrhea alverolaris was common.

8. We saw uncorrected congenital deformities which would have responded well to appropriate surgical therapy.

9. Rehabilitation of patients with nerve injuries, with fractures, and with strokes leading to hemiplegie and hemiparesis was unknown. Not one single individual with a residual impairment of gait or motor function had enjoyed the benefits of rehabilitative care, aside from that associated with return to work at a lower level of productivity.

10. We saw patients with a history of seizures. During our clinic visit, one young man of 16 had a grand mal seizure which started as a Jacksonian march, suggesting localization, but no neurological workup had been performed.

11. Multiple back deformities were seen, including scoliosis and kyphosis, occasionally due to injury but in a number of cases no explanation was forthcoming from the patients as to the genesis of their deformity. Undiagnosed back, hip, and lower-extremity pain was a common symptom in young individuals, but was difficult to document on physical examination. Symptomatically this pain resembled that of degenerative osteoarthritis, usually found in older people.

12. Active pulmonary tuberculosis was discovered by X-ray, as well as sarcoidosis, a pulmonary disease or uncertain etiology.

13. Degenerative diseases of the heart and great vessels, was extremely common, as was hypertension.

14. Anemia was not a common finding in these individuals. When it was observed, it was usually due to a combination of iron deficiency, protein malnutrition, and intestinal parasitism. The "multiple pregnancy syndrome" may also have been important in some of the anemia we observed.

In this recounting, it is difficult to convey the overall impression of our group in an objective fashion. Four consecutive days of an endless parade of illness, deformity, disability, and human suffering exerted a profound and demoralizing effect upon our team. While we had reason to question the wisdom of having brought students with us, the demoralizing effect was as profound on older physicians as on young medical students.

The people whom we examined represent an almost "pure culture" of a society totally peripheral to the influence of American health care. In a nation where levels of specialty care in medicine have achieved laudable heights, this group has not yet found its way to our most rudimentary care facilities. Such simple necessities as glasses, false teeth, braces, hearing aids, dental repair, rehabilitation, plastic surgery, repair of congenital deformities, maintenance of simple hygiene, and repair of cervical lacerations following childbirth, this population—uniquely—seems to have never attained. The specialities of plastic surgery, obstectrics and gynecology, pediatrics, surgical opthalmology, and otorhinolaryngology have no meaning to these people, for they have never had access to this high level of professional care.

The health survey team would wish to stress once more the relative ease with which we were able to document the presence of disease, and the absolute impossibility of ascribing cause to these conditions. This is an important distinction, for if we are to correct these conditions, we must know and understand where the defect lies. If medical and dental care is too expensive, we need to know this. If there are simply not enough physicians and dentists and other health facilities in this region, this must be emphasized. If socio-cultural barriers exist, we need to learn to work within these limits. If religious ethic prevents planned parenthood, we need to find ways to reasonably approach such structures. If there are injustices and cruelties which throw up insurmountable hurdles to the acquisition of food, of transportation to and from health facilities, and of entry into hospitals, we need to know of this.

Of one fact we have become convinced. If we make significant strides in the delivery of health care to these individuals and do not change the social environment in which they exist, including food, clothing, housing, education and sanitization, we will have done little to change the fundamental situation. Because the major causes of these manifold social ills are largely economic in nature, any effort we make must be tempered with an understanding of the deficiencies of our entire social structure, which tend to punish, selectively, the poor of our society. If this Committee addresses itself to medical care problems, specifically the doctor-patient relationship, and fails to grasp the complexity of the deficiency in the total life style and needs of this population, then our myopic attempts to achieve good health care will fail.

In an attempt to achieve objectivity in this report, charges will be linked to suggestions for change. I feel that physicians, and other health providers are individually responsible for a form of apathy and indifference which is generated by long association with illness. Each physician must retain his sensitivity to illness and its effect on the community as a whole. He must be willing to stand up and call attention to urgent local health needs. It requires courage to refuse to tolerate these conditions. He and his colleagues must search for ways to more effectively participate in community health programs. Furthermore, in every poor community I have visited in the past two years, the physician's primary or follow-on fee constitutes the single most significant barrier in the minds of the poor to their seeking early medical help. Physician collectively, throughout their county, state, and national medical associations, both black and white, are responsible for failing to exert leadership in our country for the development of health care programs which would, at a local level, bring resolution to these problems.

I feel that elected officials, particularly county judges sitting on commissioner courts or in other administrative occupations, hold the key over local options, both in the solicitation of state and federal funds, and more importantly, how these monies are spent in their counties.

I believe that hospitals, operating as non-profit, tax-exempt corporations, both public and private, have failed to exercise innovation and courage in the development of community programs which would reach out to the poor and almost-poor, and eliminate such hurdles to care as the "means" test.

We believe that the Federal Government, through well-intentioned legislation, has in some cases, created absolute barriers to better health care. A recent case in point involves Medicare legislation which requires that registered nurses be on duty on all shifts in hospitals receiving Medicare funds. This has recently resulted in the imminent closing of at least six hospitals serving the Rio Grande Valley, which, while giving limited health care, nevertheless provided a critical service for the migrant worker and his family. Additionally, Medicare legislation does not specifically pay for immunization for these individuals and we are now reaping the harvest of this shortsightedness in our current polio epidemic.

Finally, many corporations in our country have placed self interest too far above community concern and have failed to exert that leadership which their economic strength could have allowed. Insurance carriers have set patterns for health care compensation which have encouraged *over utilization* of our hospitals, and increased costs in insurance premiums, which have become prohibitive for the poor. The renewed attempts of the valley migrants to unionize may provide them the strength to bargain collectively to force such issues as a fair wage and decent living conditions and adequate health care insurance. The recent pressures to develop a form of National Health Insurance and group, pre-paid health coverage may provide a direct, and overdue, remedy for these injustices.

In a wholly different vein, and, perhaps, to move the cynic, a pragmatic approach to the nutritional and health problems of the poor may have greater impact than an appeal to altruistic sentiments. What we are doing to the poor in our country today is simply *bad business.* We are losing valuable man-hours of productive labor by allowing this human wastage to continue. In a recent study, Correa and Cummins (Am. J/Clin. Nutrition: 23:560–565. May 1970, demonstrate that increased caloric consumption accounted for 5% of the growth of the nation product, in nine Latin American countries, a contribution nearly as great as education. We have failed to conduct the business of the nation in a businesslike fashion.

The findings described here are not limited to the Rio Grande Valley, to the Mexican-Americans, or to the migrant worker. Disease of this magnitude we have seen in the ghettoes of American cities, and in rural areas throughout the nation. I would state emphatically that enough evidence is now at hand for us to roll up our sleeves and get to work.

APPENDIX

List of Field Foundation Participants in Hidalgo-Starr County Health Survey March 3–8, 1970

Iradell Bell
Joseph Brenner, M.D.
Robert Coles, M.D.
Larry Culpepper
Peter B. Edelman
Anita Garcia
Sheldon Greenfield
Felicia Hance, M.D.
Gordon Harper, M.D.
John Hutchinson
Melvin Krant, M.D.
Richard Le Blond
David Leonard
Harry Lipscomb, M.D.
Andrew MacMahon, M.D.
William Miller
Donald Muirhead, M.D.
John Naiden
Buford Nichols, M.D.
Robert Nolan, M.D.
David Osler
Stephen Prescott
Robert Rosenberg, M.D.
D. E. Sagov, M.D.
Milton J. E. Senn, M.D.
Raymond Wheeler, M.D.
Carey Windler
Carol Winograd

Enumerative Listing of Medical Conditions Observed in Hidalgo-Starr County Health Survey

1. chronic sinusitis
2. chronic bronchitis
3. otitis media with perforation
4. unexplained adenopathy
5. failure to thrive
6. positive serology
7. T.B.
8. T.B. on I.N.H.
9. costochronditis
10. osteoarthritis
11. scoliosis
12. fractured rib, untreated
13. hypertensive cardiovascular disease
14. obesity
15. peptic ulcer
16. tapeworm
17. ascariasis
18. pin worms
19. hypertension, untreated
20. fungus infection of skin
21. varicose veins with thrombophlebitis
22. dental caries
23. epistaxis, recurrent
24. tinea corporis
25. I.V. septal defect
26. diabetes mellitus
27. splenomegaly
28. ovarian cyst
29. anemia
30. enuresis (age 12)
31. hematuria
32. bronchial asthma
33. bursitis
34. reactive depression
35. cholecystitis/cholelithiasis
36. cataracts, unoperated
37. hernia, unoperated
38. protein malnutrition

39. hyperkeratosis
40. conjunctivitis
41. impetigo
42. glaucoma
43. sarcoidosis
44. cardiomegaly
45. goiter
46. pyelonephritis
47. hearing loss
48. gastritis
49. glomerulonephritis
50. hemorrhoids, bleeding, untreated
51. pellagra
52. ariboflavinosis
53. epilepsy
54. seborrheic dermatitis
55. alopecia areata
56. cervicitis
57. rickets
58. hyperthyroidism
59. visual loss, untreated
60. infantile diarrhea
61. cerebral palsy
62. untreated fractured knee
63. scabies
64. chronic pancreatitis
65. iodine deficiency goiter
66. unbiopsied neck nodule, 3 cm.
67. diverticulitis
68. iron deficiency anemia
69. endometritis
70. feeble-mindedness
71. cystitis
72. urethritis
73. esophagitis
74. chronic alcoholism
75. exposure to pesticides
76. cleft palate, uncorrected, 6 years
77. spinal cord lesion with $L_{2, 3}$ deficit
78. congestive heart failure
79. maduromycosis
80. tonsillitis
81. psoriasis
82. recto-vaginal fistula
83. paraplegia, field injury
84. mental retardation
85. thrush
86. amebiasis
87. bilateral ptergium
88. ruptured lumbar disc
89. hiatus hernia
90. pyorrhea alveolaris
91. arteriosclerosis obliterans
92. tendon injury, unrepaired
93. umbilical hernia
94. laryngotracheobronchitis
95. bilateral scortal hydrocele
96. birth defect
97. club foot
98. G. I. bleeding
99. congenital heart disease
100. migraine
101. strabismus, uncorrected
102. cellulitis
103. craniostenosis
104. cancer of prostrate
105. heart block
106. infantile hemiplegia
107. cystocele
108. emphysema
109. vaginal bleeding
110. broken hip

APRIL 2, 1970.

Dr. RAMIRO R. CASSO,
McAllen, Tex.

DEAR DOCTOR CASSO: I enclose herewith copies of the bacteriological analysis of water samples derived from the colonias in Hidalgo and Starr Counties during our recent visit. These analyses have been performed by the Laboratories of the Texas State Department of Health.

Of the eight samples[1] from our first study, involving the Colonies of El Gato, Los Velas Progresso, Rancho Colorado, Llano Grande, and Aqua Dulce, six of these showed the presence of coliform organisms.

I hope measures to correct this problem can be inaugurated at once.

Sincerely,

HARRY S. LIPSCOMB, M.D.,
Director, Xerox Center for Health Care Research,
Baylor College of Medicine.

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[1] Because of mechanical limitations and the condition of the forms submitted they could not be reproduced for this hearing record but may be found in the files of the subcommittee.

CONTRIBUTION OF NUTRITION TO ECONOMIC GROWTH

(By Hector Correa,[1] M.S.C., Ph.D. and Gaylord Cummins,[2] B.A., Ph.D., M.P.H)

Malnutrition may retard the economic growth of poor countries in many ways, as has been summarized by Berg (1). Malnutrition reduces life expectancy and so reduces the productive years to be expected from newly born children. By reducing resistance to disease, malnutrition may increase absence from work. Some specific nutritional deficiencies limit productivity, as for example, those that may cause blindness. The mental and physical growth of poorly fed children is retarded, so that their productivity as adults is reduced. Malnutrition affects the ability of children to learn and may even cause death. Therefore, it reduces the number of workers available and increases the cost of training. Low levels of calorie consumption restrict productivity on the job. As Berg (1) also indicates, there is only fragmentary quantitative information concerning the relation between nutrition and productivity, and none of it, at least in its present form, permits one to say whether the contribution of better nutrition to economic growth is large, small, or negligible. Such information is important because the decisions that depend on it are crucial. These include, for example, decisions concerning the allocation of scarce foreign exchange between imports of food and other goods, the allocation of new investment between agriculture and manufacturing and even the allocation of a nation's resources between production for current consumption and for growth in the stock of capital equipment. To the extent that such choices affect nutrition and that present and future output depend on the nutritional status of workers, these choices are presently being made very nearly in the dark. To put the matter a little differently, the knowledge that nutrition contributes to economic development is not, by itself, very helpful. There are innumerable ways of using resources that contribute to development, but resources are limited and choices must be made. It is, therefore, also essential to know to what extent nutrition contributes to economic development.

Accordingly, we wish to report some estimates of the contribution of better nutrition to economic growth. The estimates cover 18 countries and the period from 1950 to 1962. The countries enjoy per capita incomes ranging from $300 to $3,000/year and are evenly divided between an advanced group from Europe and the United States, and a less advanced Latin American group. The estimates are confined to the effects of increases in calorie consumption on work capacity and, as a consequence, on the growth of total output. For this reason, of course, they tend to understate, perhaps greatly, the total contribution of better nutriion.

In an exercise of his kind it is impossible to achieve anything approximating the usual precision found in the biomedical sciences. It is, nevertheless, important to do what is possible, and the contribution which we could measure is striking for the Latin American countries, even after allowing for all the errors and omissions.

DATA AND METHODS

An estimation of the contribution of increased calorie consumption to economic growth requires three steps and three sets of methods. One must first be able to measure the growth in output due to the increase in the productive capacity of labor. One must then be able to estimate the increase in productive capacity of labor due to increased calorie consumption. Finally, one must ascertain the changes that took place in the calorie consumption of workers.

Tinbergen (2), Solow (3), Correa (4), Denison (5), and others have developed a method for measuring the contributions of increases in productive inputs (labors, capital, education, et cetera) to growth of total output. We used this method in the first step. As applied here, it rests on the following basic equation:

$$r_Y = ar_E + ar_N + A$$

where r_Y is the rate of growth of total output; a is labor income as a fraction of total output; r_E is the rate of growth of the productive capacity of labor attributable to better education; r_N is the rate of growth of the productive capacity of labor attributable to increased calorie consumption; and A is a residual reflecting such factors as technological progress, growth in the stock of physical capital, and the various effects of better nutrition that we could not measure separately. If, for example, the working capacity of the labor force increased by $r_N \cdot 100\%$ because of better nutrition and if the ratio of labor income to total output were a, then one could conclude that better nutrition accounted for $ar_N/r_Y \cdot 100\%$ of the growth in total output. The decision to study explicitly those factors that contribute to economic growth or those that are to be set aside under A, depends entirely on the availability of data and the purpose at hand. We present estimates of the effects of education in order to compare them with the effects of increased calorie consumption.

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[2] Assistant Professor, Department of Tropical Medicine and International Health and Department of Economics, Tulane University.

The plausibility of the findings depends in part on the credibility of the relationship just described. A brief explanation is, therefore, required of the assumptions from which it is derived. There are two. First, the economy in question works as if it were "perfectly competitive," namely, the prices of goods and services were determined by supply and demand in open markets. Some such assumption is indispensable, and generally this one has proved to be the most useful. (It underlies, for example, all measures of the "economic burden" of particular diseases.) Secondly, the economy is characterized by "constant returns to scale." This means that if all productive inputs were to increase in a given proportion, output would increase in the same proportion. Again some such assumption is unavoidable, and this one has proved to be the most useful.

The second step in estimating the effect of increased calorie consumption entails ascertaining the relation between calorie intake and work capacity. From experimental data, Lehmann et al. (6) have estimated the relation between calorie intake and work capacity for four categories of work, classified according to how heavy the work is. They provide detailed descriptions of kinds of occupations that fall into each category, and with these data we were able to establish a fair correspondence between their classification and the United Nations international classification of industries (7). Their results, arranged according to the United Nations industrial classification, are shown in Table I below. For Each industrial group the table shows for various levels of calorie intake the work done as a percentage of the maximum that could be done with adequate nutrition in the same way at both ends of the period studied. For this reason, too, the errors in the estimates of growth in capacity to work would be smaller than those contained in the estimates of capacity to work for single years.

The methods described so far yielded estimates of actual annual intakes of male adults for each industrial group and each country. Before these could be compared with the data in Table I we had to make several further adjustments. The data in table I were derived for a temperature of about 10 C and for men between 20 and 30 years old. We could not ascertain their weights. We assumed an average weight of 65 kg for all countries. This is probably overestimated for the Latin American countries and underestimated for the others. The resulting errors, however, are probably small. A reduction in weight of 5 kg reduces required intake by about 100 kcal/day (8). An error of 100 kcal/day, in turn, would produce an error of about 5% in estimated working capacity. As before, the same error would occur in the results for both the initial and terminal years, so that the error in the estimated rate of growth of working capacity would be much less than 5%.

Data are available concerning the relation between calorie requirements and average temperature (8), and also for average temperatures in the 18 countries (9, 10). The basic temperature data are for areas within each country. We compound countrywide averages using area populations as weights and then converted the estimated calorie intakes into the equivalents for an average temperature of 10 C.

The effect of additional calorie consumption on work capacity presumably decreases with age. To allow for this effect of differences in age, we assumed that the effects of increased intake shown in Table I held exactly for ages 15–30 and diminished continuously over older ages, reaching zero at age 60.

In regard to sex differences, we assumed that for each age group women's capacity to work increased in the same proportion as men's.

The steps just described determined estimates of the growth in productive capacity of the labor force due to increased calorie consumption, r_N, for each country. From these estimates and national income data (7) we computed the rate of growth of output attributable to increased caloric consumption, $ar_N \cdot 100$ equals percent increase.

There is no need to describe here the details of the method by which the value of the contribution of education was estimated. In the case of the advanced countries, we took the estimates directly from Denison (5). Using comparable data and methods, estimates were derived for the Latin American countries.

RESULTS AND DISCUSSION

The estimated contributions of increased calorie consumption to the growth of output for the 18 countries are shown in Table II. The contribution in the advanced countries was practically nil. Although there was considerable variation among the Latin American countries, the contribution there was in most cases substantial, averaging almost 5% of output growth. This was nearly as large as the contribution of education. The results of these comparisons are not surprising; production processes in the less advanced countries make comparatively modest demands in relation to educational attainment and comparatively heavy demands on physical health. The reverse tends to be true of advanced countries.

TABLE II.—CONTRIBUTIONS OF INCREASED CALORIE INTAKE AND EDUCATION TO GROWTH OF NATIONAL PRODUCT IN SELECTED COUNTRIES 1950–62

		Increased calorie intake		Education	
Country	National product percent rate of growth/year (A)	Percent rate of growth of national product contributed (B)	(B) as percent of (A) (C)	Percent rate of growth of national product contributed (D)	(D) as percent of (A) (E)
Latin America:					
Argentina	3.19	0	0	0.53	16.5
Brazil	5.43	.23	4.2	.18	3.3
Chile	4.20	.05	1.2	.20	4.8
Colombia	4.79	.31	6.4	.20	4.1
Ecuador	4.72	0	0	.23	4.9
Honduras	4.52	.41	9.1	.29	6.5
Mexico	5.97	.60	10.1	.05	.8
Peru	5.63	.43	7.6		
Venezuela	7.74	.18	2.4	.19	2.4
Average	5.13	.25	4.6	.23	5.4
Europe and United States:					
Belgium	3.20	.02	.6	.43	13.4
Denmark	3.51	0	0	.14	4.0
France	4.92	.05	1.0	.29	5.9
Germany	7.26	.16	2.2	.11	1.5
Italy	5.96	.16	2.7	.40	6.7
Netherlands	4.73	0	0	.24	5.1
Norway	3.45	0	0	.24	7.0
United Kingdom	2.29	.01	.4	.29	12.7
United States	3.32	0	0	.49	14.8
Average	4.18	.04	.8	.29	7.9

Since increased calorie consumption by itself raised output almost as much as did education, the aggregate effect of better nutrition on output may well have exceeded that of education. For some purposes it would be more important to know the effect of better nutrition on growth of output per capita than its effect on growth of total output. At present there is no satisfactory method for measuring the contribution of health to growth in output per capita. This is chiefly because improved health affects growth of population as well as that of output. But in the case of nutrition, the effect on population growth probably is comparatively small; since total output grew more than twice as rapidly as output per capita, increased calorie consumption may, on the average, have caused as much as 10% of the growth in output per capita.

Existing data are inadequate for systematic estimation of the contributions of nutrition and education to the economic growth of very poor countries where the per capita incomes are less than $200/year. One may comment, however, about the contribution of increased calorie consumption in those countries. As income and output grow, the proportion of the labor force engaged in occupations requiring relatively high calorie consumption tends to decrease (11). The poorer a country is, the greater the effect of increased calorie consumption on economic growth tends to be. Among our 18 countries the coefficient of correlation between the contribution of increased calorie consumption and the level of per capita income is —0.56 and the significance is at the 5% level. These considerations suggest that increased calorie consumption contributed even more to the economic growth of very poor countries than to that of the Latin American group.

Our estimates clearly rest on a series of more or less questionable assumptions. This was unavoidable, partly because the necessary national data are either lacking or defective, and also the experimental evidence concerning a number of relationships involved in the method of estimation is incomplete. It would have helped, for example, to have had data on the distribution, by occupation, of workers' consumption of calories. The estimates also could have been improved had there been data similar to those in Table 1 but derived for older groups of workers. In any event, the description of the methods we used indicates the information necessary if one is to estimate the economic consequences of improved nutrition, or, for that matter, of any improvements in health that affect capacity to work.

SUMMARY

Malnutrition may in many ways impede the economic growth of poor countries. Even though important policy decisions depend on quantitative data concerning the effect of nutrition on economic growth, there is little such information available. We have estimated effects of increased calorie consumption on the productive capacity of the labor force and, therefore, on the economic growth, of 18 countries from 1950 to 1962. For nine Latin American countries increased calorie consumption accounted, on the average, for almost 5% of the growth of national product. This was nearly as great as the contribution of education. Increased calorie consumption had a negligible effect on the economic growth of nine advanced countries. It probably causes a substantially larger fraction of the growth in output per capita than of the growth in total output in poor countries. Also, its effect is probably greater in very poor countries than in the Latin American group.

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Senator MONDALE. Our next witness is Dr. Ramiro R. Casso.

STATEMENT OF RAMIRO CASSO, M.D., GENERAL PRACTITIONER, McALLEN, TEX.

Dr. CASSO. Senator Mondale, members of the Senate Subcommittee on Migratory Labor. I am Dr. Ramiro R. Casso of McAllen (Hidalgo County), Tex. I am a doctor of medicine and have been in the general practice of medicine and surgery in McAllen, Tex., for the past 13 years.

My medical practice consists in treating from 50 to 100 patients per day, the vast majority of whom are poor people. Probably as many as 80 percent of my patients are farmworkers, some migrants and other exmigrants who do farmwork, packing shed labor, or some other similar seasonal work locally.

Suffice it to say that my people are among the poorest in this affluent society. Because of their wretched earnings, our people suffer all of the consequences of being poor. There is severe malnutrition among large numbers of them and this enhances their susceptibility to all forms of disease. It is no mystery that nutritional anemia, protein malnutrition, diarrheas, tuberculosis, skin infections, influenzas, pneumonia, birth defects, prematurity, and neonatal deaths are much more prevalent among the farmworkers' families than among the general population.

Mr. Chairman, the health survey conducted in March 1970 in Hidalgo County by the very eminent physicians assembled by the Field Foundation was a milestone in the area of health in south Texas for several reasons. First, it documented the high incidence of malnutrition, vitamin deficiencies, and disease which was suspected by many to exist. Secondly, a very excellent presentation of the findings was made by Dr. Harry Lipscomb of Baylor Medical College to a meeting of the Hidalgo-Starr County Medical Society. Thirdly, and most important of all, Dr. Lipscomb was successful in challenging the medical society and Dr. Carl Love of McAllen, his former student and presently the president of the Hidalgo-Starr County Medical Society, to take the lead in mobilizing the medical community in search of solutions to the enormous medical problems of the area.

Those solutions, if they are implemented, will include ending the present hesitancy of our hospitals to serve all of the people, rich and poor alike. At the McAllen Hospital, where I work, we have the latest X-ray and laboratory equipment, every excellent surgical suites and a completely equipped coronary care unit. Hopefully, in the future more poor patients will be able to avail themselves of these facilities.

Those solutions, if they are implemented, will include an expansion of the public health activities in Hidalgo County. At present these activities are limited to tuberculosis detection, followup on contagious diseases and immunization of children. The inadequacy of our immunization program was pointed out during the past 2 months when in Hidalgo and Cameron Counties. we had nearly all the suspected cases in the Nation of poliomyelitis.

Beyond the efficient carrying out of these activities, we hope the public health officials will provide forms of treatment, outreach, and care which serve the poverty community.

Those solutions, if they are implemented, will also include the expansion of the migrant health program in this area of Texas. In the meantime, those of us who are concerned, do what we can.

I have been personally operating a charity clinic at the Farmworkers Service Center in McAllen at the invitation of Tony Orendain, who also heads the farmworkers organization for Cesar Chavez in the Rio Grande Valley. With the aid of Sister Sharon Stanton, a Catholic nun who is also a registered nurse, we hold a 2-hour clinic three times a week. We treat from 40 to 120 patients a week, but are limited by the lack of adequate equipment, examining rooms, and the absence of X-ray or laboratory facilities. At this clinic we treat only those who do not have medicare, medicaid, or migrant health coverage, and who have no money to see a private physician.

It is very discouraging and depressing to attempt to operate a charity medical clinic with very limited resources. I want to tell you something about how the farmworkers clinic was started.

Last year, when I received the first letter that Tony Orendain wrote to all the members of the Hidalgo-Starr County Medical Society, asking us to start a medical clinic, I visited the United Farm Workers Service Center in McAllen and discussed the matter with him at length. As it turned out, Tony was able to spare a corner 100 feet wide by 12 feet long and that was where the clinic was started. Tony obtained an old table that I used for an examining table and with a few sheets of sheetrock constructed partitions to provide the necessary privacy for physical examinations.

I obtained some medications and medical supplies from my office and we began to treat the sick. By word of mouth the word was passed in the "colonias," and though many of the sick do not have transportation or do not even know that the clinic exists, yet during the January 1970 influenza epidemic we were seeing from 45 to 50 patients each day. It became obvious that we couldn't continue this operation out of a 10- by 12-foot locale, so I offered Tony Orendain that I would personally pay the first month's rent in an adjoining building if he would assume the responsibility thereafter.

He accepted and we moved to our present location, which is grossly inadequate in all respects, but which at least gives us four to five times more space than we had before.

Gentlemen, the lighting in the clinic is very poor. Somebody has to go clear across the room to plug in the single examining lamp that we have. We have no examining tables per se, we have no medical cabinets. We do not have a certain supply of injectable medications except those that I bring from my private office. We have no refrigerator to keep our medicines in. We do not have a laboratory to do a simple blood count or urinalysis or an X-ray machine to take a chest X-ray.

Needless to say, a lot of diagnostic guesswork takes place in the clinic, but this is better than no clinic at all. I rely heavily on the use of injectables, gentlemen, because very frequently the medication that I inject into their bodies is the only medication they will receive, since they very frequently do not have the money to fill a written prescription.

The diseases most frequently seen in the farmworkers clinic are those seen in any general practice office where poor people are treated; namely, many nutritional anemias, protein malnutrition, upper respiratory infections, draining ear infections, pneumonias, diarrheas with all degrees of dehydration, and many skin infections.

Mr. Chairman, we need to attract more physicians to the many pockets of poverty throughout the country. We need to deemphasize specialization in medicine and encourage more medical graduates to go into general practice. We need a total commitment from the Congress and the Executive to provide the facilities and the manpower to treat the ailments of all of our citizens regardless of their ability to pay.

We pray that you, Mr. Chairman, and your colleagues will search for the legal machinery that can bring this about.

Thank you, gentlemen, for your concern and for all your efforts to alleviate suffering among the migrants in our Nation. Thank you, Mr. Chairman, for the invitation to appear before this subcommittee.

Senator MONDALE. Dr. Casso, we are most grateful for your testimony. We are even more grateful for your work. I recall your testimony at Edinburg, because I thought it was the most helpful of all that we received.

Do you have a guess as to how many migrant mothers deliver their babies without professional help?

Dr. CASSO. No; I don't, but I know that it is the largest percentage in our State, in the southern part of our State where most of the Mexican-American people reside, because we have the largest percentage of midwives and others who deliver babies.

Senator MONDALE. If a high percentage of the mothers are not under qualified, professional care but under the help of midwives, what is your opinion of the general level of competence of the midwives, particularly how competent are they to handle a complicated delivery?

Dr. CASSO. In the cases of uncomplicated delivery, I believe that most of them could be trained. Some midwives could be trained to handle those cases.

Certainly many registered nurses could be trained to do that work, with the understanding that if any complication became obvious that a physician could be called to lend a helping hand.

Senator MONDALE. Isn't it fair to say today that there are hundreds of babies born in the general area in which you practice without proper, professional care of the mother during birth?

Dr. CASSO. That is true.

Senator MONDALE. And as a result there is a high degree of subnormalcy or other kinds of physical problems which could have been easily prevented by just proper care at the time?

Dr. CASSO. That is correct.

Senator MONDALE. You indicated that the local medical association has now become activated, the Hidalgo-Starr County Medical Society. What are they doing to help this program?

Dr. CASSO. I notice today Dr. Carl Love, who is president of the Hidalgo-Starr County Medical Society, is here. He is more knowledgeable as to just what steps have been taken, but they are very significant. I believe that Dr. Love has done more to motivate the medical society than all the previous presidents of the medical society combined.

Senator MONDALE. Thank you.

Senator Yarborough, do you have any questions?

Senator YARBOROUGH. Dr. Casso, the closing paragraph of your statement points up one great problem in this country, particularly in the poor area, whether they be ghettos or rural areas. That is the need for general medical practitioners, family doctors.

The great age of specialization has hit us. In 1931 three out of four, 75 percent, of all medical doctors in America were engaged in family practice so called. That is 1931. In 1967, only 21 percent were engaged in family practice, one out of five.

Now as chairman of the Health Subcommittee I have a bill pending—we have already finished the hearings this year—to pump money into medical schools to train family doctors. A number of medical schools have already set up this family doctor part of it. They are going to train them there and have them pledged to go into the general family practice, so that we can get doctors who are not specialists, but can get out and treat families in rural areas, in ghettos, any place in the cities.

The one great insecurity families have, not only the poor but the middle-class families, is that they don't have somebody that they can call a family doctor that they can turn to in an emergency. The polls in America show that that is one great shortage all over the Nation.

Dr. CASSO. That is correct.

Senator YARBOROUGH. We have a beginning bill on that that I hope to be able to push through this year, to obtain some relief in that regard.

The time is so late, Dr. Casso, that I won't ask further questions, but one point has been raised here in Dr. Lipscomb's statement that is of vast importance to everybody in the Nation. In addition to migrant workers, and that is the fourth paragraph of page 8 of your statement, Dr. Lipscomb, you talk about the number of hospitals being closed. They are closing in the valley, they are closing all over Texas, they are closing in Iowa.

You say that is because of the medicare legislation which requires that registered nurses be on duty on all shifts of the hospital receiving medicare funds.

Now I have sent for the law. I have heard a dispute about this as to whether this is a law of Congress; if it is a law of Congress, I want to amend it just as soon as we can, and I have here the regulation of the Social Security Administration and Medicare Administration—it has been phoned in to me here—that the law says that it provides for 24-hour nursing service rendered or supervised by a registered professional nurse and the hospital will be qualified under medicare if it has a licensed practical nurse or registered professional nurse on duty at all times.

I have sent for the law itself. If that is what the law provides, it does not require that a registered nurse be present at all times. Here it is. I am reading the law now from the United States Code, supplement 5, 1965–69, with these amendments, title 1395X, section E, paragraph 5. It has what a hospital has to do to qualify:

> 5. Provides 24-hour nursing service rendered or supervised by a registered professional nurse and has a licensed practical nurse on duty at all times.

As a lawyer and former judge, I say that does not require that a registered nurse be on duty at all times. That is a hoax.

That is the way that the people administering the social security law in Medicare Administration get around to screen these hospitals out so they won't have to pay the bill. If they have a licensed practical nurse on duty 24 hours, that will comply with the law.

These hospitals are being told it won't. We have the law here. I want to put that in the record. I want to call on the Social Security Administration this week. I want my staff to prepare proper letters, demanding that these hospitals not be screened out, that they are eligible in my State and in California they are called licensed vocational nurses. They are called licensed practical nurses in the other 48 States.

In the valley they are threatening to close several of them because they don't have a registered nurse on duty 24 hours. It is not happening only there, it is happening in central Texas, it is happening all over the Union.

Dr. Lipscomb. The implications of what you say is that this is a local interpretation of the law which could be changed——

Senator Yarborough. I have heard of it from other States. I think it is an interpretation by HEW. The law does not require that a registered nurse be on duty. You have to have a registered nurse for the hospital to supervise, but she does not have to be there 24 hours a day. If you have one registered nurse to supervise what the others are doing, that will comply with the law of Congress.

I won't pursue that further. That is under social security, under another committee, not our committee. I wanted to point out I am going to start work to get some relief there.

Senator Mondale. Senator Saxbe?

Senator Saxbe. I have no questions.

Senator Mondale. Thank you very much again, Dr. Casso. You are making a most significant contribution to the farmworkers in the Rio Grande Valley, and I know it is deeply appreciated.

We will print your entire statement at this point in the record.

(The prepared statement of Dr. Casso follows:)

Prepared Statement of Ramiro R. Casso, M.D., General Practitioner, McAllen, Tex.

Senator Mondale, members of the Senate Subcommittee on Migratory Labor. I am Dr. Ramiro R. Casso of McAllen (Hidalgo County) Texas. I am a Doctor of Medicine and have been in the general practice of medicine and surgery in McAllen, Texas, for the past 13 years.

My medical practice consists in treating from 50 to 100 patients per day, the vast majority of whom are poor people. Probably as many as 80% of my patients are farmworkers, some migrants and others ex-migrants who now do farmwork, packing shed labor, or other similar seasonal work locally.

Suffice it to say that my people are among the poorest in this affluent society. Because of their wretched earnings our people suffer all of the consequences of being poor. There is severe malnutrition among large numbers of them and this enhances their susceptibility to all forms of disease. It is no mystery that nutritional anemia, protein malnutrition, diarrheas, tuberculosis, skin infections, influenzas, pneumonia, birth defects, prematurity and neonatal deaths are much more prevalent among the farmworkers' families than among the general population.

Mr. Chairman, the health survey conducted in March, 1970, in Hidalgo County by the very eminent physicians assembled by the Field Foundation was a milestone in the area of health in South Texas for several reasons. First, it documented the high incidence of malnutrition, vitamin deficiencies, and disease which was suspected by many to exist. Secondly, a very excellent presentation of the findings was made by Dr. Harry Lipscomb of Baylor Medical College to a meeting of the Hidalgo-Starr County Medical Society. Thirdly, and most important of all, Dr. Lipscomb was successful in challenging the Medical Society and Dr. Carl Love of McAllen, his former student and presently the president of the Hidalgo-Starr County Medical Society, to take the lead in mobilizing the medical community in search of solutions to the enormous medical problems of the area.

Those solutions, if they are implemented, will include ending the present hesitancy of our hospitals to serve all of the people, rich and poor alike. At the McAllen Hospital, where I work, we have the latest x-ray and laboratory equipment, very excellent surgical suites and a completely equipped coronary care unit. Hopefully, in the future more poor patients will be able to avail themselves of these facilities.

Those solutions, if they are implemented, will include an expansion of the public health activities in Hidalgo County. At present, these activities are limited to Tuberculosis detection, follow-up on contagious diseases, and immunization of children. The inadequacy of our immunization program was pointed out during the past two months when in Hidalgo and Cameron Counties, we had nearly all the suspected to have been due to poliomyelitis. Beyond the efficient carrying out of these activities, we hope the public health officials will provide forms of treatment, outreach, and care which serve the poverty community.

Those solutions, if they are implemented, will also include the expansion of the Migrant Health Program in this area of Texas.

In the meantime, those of us who are concerned, do what we can.

I have been personally operating a Charity Clinic at the Farmworkers Service Center in McAllen at the invitation of Tony Orendain who also heads the Farmworkers organization for Cesar Chavez in the Rio Grande Valley. With the aid of Sister Sharon Stanton, a Catholic nun who is also a Registered nurse, we hold a two-hour clinic 3 times a week. We treat from 40 to 120 patients a week, but are limited by the lack of adequate equipment, examining rooms, and the absence of X-ray or laboratory facilities. At this clinic we treat only those who do not have Medicare, Medicaid or Migrant Health Coverage, and who have no money to see a private physician.

It is very discouraging and depressing to attempt to operate a charity medical clinic with very limited resources. I want to tell you something about how the Farmworkers clinic was started.

Last year, when I received the first letter that Tony Orendain wrote to all the members of the Hidalgo-Starr County Medical Society, asking us to start a medical clinic, I visited the United Farm Workers Service Center in McAllen and discussed the matter with him at length. As it turned out, Tony was able to spare a corner 10 feet wide by 12 feet long and that was where the clinic was started. Tony obtained an old table that I used for an examining table and with a few sheets of sheetrock constructed partitions to provide the necessary privacy for physical examinations.

I obtained some medications and medical supplies from my office and we began to treat the sick. By word of mouth the word was passed in the Colonias, and though many of the sick do not have transportation or do not even know that the clinic eixsts, yet during the January 1970, influenza epidemic we were seeing from 45 to 50 patients each day. It became obvious that we couldn't continue this operation out of a 10′ by 12′ locale, so I offered Tony Orendain that I would personally pay the first month's rent in an adjoining building if he would assume the responsibility thereafter.

He accepted and we moved to our present location which is grossly inadequate in all respects, but which at least gives us 4 to 5 times more space than we had before.

Gentlemen, the lighting in the clinic is very poor. Somebody has to go clear across the room to plug in the single examining lamp that we have. We have no examining tables per se, we have no medical cabinets. We do not have a certain supply of injectable medications except those that I bring from my private office; we have no refrigerator to keep our medicines in; we do not have a laboratory to do a simple blood count or urinalysis or an X-ray machine to take a chest X-ray. Needless to say, a lot of diagnostic guess work takes place in this clinic, but this is better than no clinic at all. I rely heavily on the use of injectables, gentlemen, because very frequently the medication that I inject into their bodies is the only medication they will receive, since they very frequently do not have the money to fill a written prescription.

The diseases most frequently seen in the Farmworkers Clinic are those seen in any general practice office where poor people are treated, namely, many nutritional anemias, protein malnutrition, upper respiratory infections, draining ear infections, pneumonias, diarrheas with all degrees of dehydration, and many skin infections.

Mr. Chairman, we need to attract more physicians to the many pockets of poverty throughout the country. We need to de-emphasize specialization in medicine and encourage more medical graduates to go into general practice. We need a total commitment from the Congress and the Executive to provide the facilities and the manpower to treat the ailments of all of our citizens regardless of their ability to pay. We pray that you, Mr. Chairman, and your colleagues will search for the legal machinery that can bring this about.

Senator Mondale. Dr. Harper?

STATEMENT OF GORDON HARPER, M.D., TRAINING IN PEDIATRICS, BOSTON, MASS.

Dr. Harper. Thank you, Mr. Chairman.

My name is Gordon Harper. I am a physician in the second year of pediatric training in Boston. I participated in the March trip to

McAllen, Tex., and, because the northerner sojourning and muckraking in the South is legitimately suspect in both southern and northern eyes, I have since visited other areas where migrants live and work in Connecticut and Michigan.

Much testimony has already been presented about the number of patients we saw in McAllen, the kinds of diseases they presented, and how these conditions arise from poverty and discrimination. I would like to present a particular case to illustrate what we are talking about.

A BABY WITH CELLULITIS

The first day we were working in Dr. Casso's clinic, a young mother from Pharr brought in a baby, perhaps a year and a half old, complaining that his head and neck were swollen. He had been well, she told us, until 3 days previously, when insect bites on his scalp became infected. During the succeeding days the infection spread and the baby grew less active and was not eating well. He developed a fever and now just lay about, showing no interest in those around him.

Examining the baby, we found him well developed and fairly well nourished, but acutely ill, "toxic" as we say, lying motionless on the examining table. His temperature was 106°, his pulse was rapid and his respirations labored. One side of his scalp and neck was red hot, swollen and weeping. Huge lymp nodes were palpable in the adjacent areas. Pustules in his scalp, the likely location of the insect bites to which the mother referred, seemed to be the source of the the infection.

This was cellulitis, a bacterial infection of the skin and subcutaneous tissues, with probable spread of the infection throughout the baby's body—sepsis. We had a very sick baby on our hands.

What had this infection to do with migrant labor? First of all, it began with insect bites, a familiar summer affliction for all of us, but much more common among children who live in substandard housing.

In Texas all of us saw windows without screening, open latrines, inadequate garbage disposal, standing water and gaping holes in floors and walls. We saw carrot chips used as ground cover—garbage in the front yard.

In Michigan I visited a migrant camp, near the Aunt Jane pickle factory, a Borden subsidiary, built literally right next to a municipal sewage pool and garbage dump. The stench was suffocating.

Under these conditions insects and rodents thrive and attack the children playing or sleeping nearby. Moreover, once exposed to such bites, babies are much harder to keep clean and the bites more likely to be infected if homes have no running water.

Not surprisingly, then, both in Texas and Michigan, infected bites are one of the most frequent conditions found in migrant children, directly related to the conditions they must live in. And so was this baby's initially trivial infection.

Secondly, the infection, developing over 2 days, received no medical attention until the mother came to us on the third day. Superficial skin infections are common problems in children in Boston or Washington as in Texas, especially when the weather is warm as it is most of the year in the Rio Grande Valley. Treated promptly, with good cleansing, a clean dressing, and antibiotics as indicated, such an infection should never reach the proportions we found in McAllen.

But we learned there, as you are hearing today, how seldom poor people there see doctors. A visit to a private doctor can cost $10, plus charges for medicines. Dr. Casso has been one of the few physicians in McAllen who would see patients who could not pay, and we have seen under what a heavy caseload he functions.

This mother, like so many, knew of no free dispensary. There was no outpatient department or free emergency ward like those which we take for granted in the rest of the country to which she could go. And the mother was reluctant to travel to Mexico, where many obtain cheaper and more sympathetic care, with a baby so ill.

I would like you all to understand how it was very difficult for us to believe, as this mother had long since learned, that there was no place, convenient and close by, where she could take her baby when he was sick and she had no money. That was how a minor infection became a life-threatening one.

The third part of this baby's case now unfolds: What could we do about it? Again, in any of the emergency wards where we have worked, where we have been on hand to treat whoever came in, without asking who could pay or how much any indicated therapy would cost, this baby would have been hospitalized and antibiotic therapy begun without delay. But in McAllen we had to ask who could pay.

The answer was that there is no medicaid program in Texas for those not already covered under categorical welfare programs, that there are no free beds in the local hospital only one block away, and that a deposit is required for a patient's admission to that hospital. Many people in McAllen, as we will document, have been told after the birth of a child in the hospital: "You pay the bill or we keep the baby."

What did we do? The baby received antipyretics and a large intramuscular injection of antibiotics and was observed for 6 hours in the office. He then looked much better, was given another dose, and was sent home to return next day. This therapy, good bush medicine dictated by expediency, "worked" this time, but is hard to justify one block from a general hospital, the McAllen General Hospital.

Every parent of a critically ill child, faced with a disease beyond the control of aspirin and cough syrup, feels helpless and alone. For this baby's mother, however, such helplessness was compounded by three facts equally beyond her control, which should have had nothing to do with her baby's getting sick or being treated—and yet which, as we have seen, had everything to do with both: The family was poor, they were migrants, and they were Chicanos in Texas.

THE WAGES OF CONCERN

That was a piece of our experience in Texas. In Michigan, 1 week ago I visited several counties where families from the Lower Rio Grande Valley—some of the same families we had seen in March in McAllen—have been picking the strawberries, are now working in the cherries, and soon will begin work with the cucumbers and tomatoes destined for our tables.

In several ways life is a bit less harsh for them there. They have some work, a food stamp program makes it more likely that they and their children may have enough to eat and several counties have programs of medical care. But their housing, in camps maintained by the growers, is often worse than they knew in Texas.

I visited a camp on the Old Mission Peninsula where 17 people were living, sleeping, cooking and eating in two rooms 8 by 18 feet under a leaking roof. Most importantly, however, the feeling of not being at home, of not belonging, of not being a part of the counties where they work, or of the country which enjoys the fruits of their labor—that feeling is still there.

Senator YARBOROUGH. When Dr. Egeberg testified before our committee on the migrant health bill he had been in the fields of California where they have harvested vegetables and fruits. He said, "If affluent America, which eats the vegetables and fruits at their table, could see the conditions of health of the people picking them and the conditions of sanitation in the fields and orchards where they are picked, they would not enjoy eating the fruits and vegetables as much, if they could see those conditions."

Dr. HARPER. I hope to describe my reaction.

Senator YARBOROUGH. If you have that later in your statement, good.

Dr. HARPER. The efforts of the State of Michigan and of many voluntary organizations to improve the migrants' lot are at this time, even last week when I was there, being actively opposed by those who control most aspects of the migrants' lives, the growers.

The facts are simple. Federal and State housing codes set standards for migrant camps which must be met before a camp can be licensed to receive migrant-tenants. A federally funded program sponsors law students who act as legal advocates for the migrants in housing and other areas. By reporting alleged violations of the codes to a county health department, a law student earned the wrath of a grower who regarded such action (not only legal but sponsored by the Government) as a challenge to his right to run "his" camps and make a profit from the work of "his" migrants as he wished.

The night before I arrived in Michigan this grower, finding the student in question in one of his camps, where he was visiting friends who were tenants there, assaulted him physically. When the student escaped with his friends, leaving his car, the grower broke all the windows in the car with a steel pipe. The atmosphere the next day was tense: "For the first time in 5 years," said one veteran of the migrant programs, "I'm afraid someone is going to get killed."

The next day I got a taste of the same treatment. I was speaking to migrants at the side of a road, on the edge of a camp, when a grower drove up and ordered me off the premises. He boasted that he had known within 3 minutes of my arrival, via a fleet of cars with two-way radios which the growers maintain for surveillance, that a stranger was visiting one of his camps. He accused me of trying to ruin his business by "snooping" among the workers, and threatened me with physical harm should I make any more visits to "his" migrants' camps without his approval. "If those do-gooders come on any of my land," he said, "they're never going to make it back to Lansing."

Senator YARBOROUGH. What State was that in?

Dr. HARPER. That was Michigan.

The attitudes of these rough-and-ready growers toward the workers on whose labor their profits depend, and will continue to depend, despite their headlong and much-touted rush to mechanized harvesting—"We won't need all these hands a year or two from now," they argue, with the self-appointed plausibility characteristic of the man trying to justify the saving of money at the expense of human health or dignity, "and so why should we invest a lot of money in housing for them now?"—are the same as the committee has heard before, and will hear again today and tomorrow from the dominant classes in Texas and Florida.

All of these attitudes serve one selfish purpose: to absolve the grower of any responsibility for the obvious and infamous short life expectancy and apathy which are the migrant's share of the American way of life. The grower will be absolved, of course, if the migrant can be successfully banished from the circle of our sympathy for such is the outcome of prejudice, whether racial, cultural or economic. In the case of Chicano migrants in Michigan, of course, it is all three.

To serve such a purpose, the migrants are dismissed as slovenly. "They live like animals," say growers who give them shacks to live in.

Or again, the growers tell us, "The migrants like to travel. They like to drive around and see the country, to get out of the heat of Texas in the summer, to come up to the Midwest to swim." Migrants, of course, can be found who will say they like to travel, but too many mothers show despair as they tell of having to take children out of school in early May, to begin again only in November, to believe the myth of the happy gypsy. How that myth can withstand the image of 33 people and their belongings traveling 1,500 miles in an enclosed truck, with children who need rest stops every 45 minutes, to pick cherries for $8 a day, is a wonder of public relations beyond my comprehension.

Or the migrants, they say, are deadbeats. "I've seen one mail a money order for $500 to Texas the same day he buys $100 worth of food stamps," complains a grower whose indignation at the spectacle of Government subsidies does not extend to the payments he and his fellow growers do not hesitate to cultivate.

With the migrants excluded by all these devices from the range of their sympathies, growers are able to indulge in self-pity. They have a huge personal sense of grievance, of being put upon, of not getting what they believe they are entitled to, but the scale of these grievances can only be called grotesque compared to the wasted bodies, destroyed spirits and shortened lives which are the migrants' lot.

One complains, "With what I've got invested and what I could earn on my own, shouldn't I be getting $60,000 a year, not just $40,000"?

With such an acute sense of personal grievance, a grower may have little sympathy left over for those around him. "Babies die all the time," says one grower when asked about a notorious case of a 9-month-old who died last year of diarrhea and dehydration, after being refused admission to a hospital in southwest Michigan. "Why should they get so excited when one dies here?"

From this testimony and that presented today from Texas, a picture emerges of the channel in which the migrant stream flows from Texas to the Middle West: It is a hard journey through a land where money and profit move men's hearts more than does human misery, and where all kinds of self-serving rationalizations and spurious slurs on the migrants themselves seek to conceal the fundamental facts of human poverty and need, and justify indifference to them or support active interference with those who come to act on the migrant's behalf.

The kind of information the self-syled vigilantes would keep us from gathering, and the kind of tragedies which mark the migrant's travels are illustrated by the following case history.

AN IRRITABLE BABY

In Traverse City I learned from a young father of the illness last month of his 3-month-old son. While traveling through Indiana en route to Michigan, where his family would begin the strawberry season, this baby developed diarrhea, fed poorly, and became irritable. Diarrhea and poor feeding are common pediatric symptoms especially in the chicano population, where infantile gastroenteritis still accounts, as it did one generation ago in the population at large, for the largest part of infant mortality.

This very month, when the rest of the country has been congratulating itself on the fact that no one died last year from poliomyelitis, the most serious of the enteric viral infections, three deaths from polio have occurred in south Texas. In the absence of immunization, polio has the same epidemiology, the same relation to poor sanitation, as the less dramatic forms of viral diarrhea.

Unprotected outhouses, homes without plumbing, contaminated water supplies, and fields without toilet facilities explain the frequency of these diseases. Poor nutrition—the protein and vitamin deficiencies we have reported—and lack of adequate care account for the death rate in the easily treated simple diarrheas.

But the other complaint, irritability, is one that gives every doctor pause, because of the possibility of meningitis. Small babies often do not show the physical findings, like stiff neck or resistance of flexion of the leg, which we look for when adults have infections of the meninges, and often the characteristic sign in infants, the bulging fontanel or soft spot is absent despite the presence of infection.

To make the diagnosis, therefore, the doctor has to be suspicious, to size up the baby as a whole—asking "Does he look sick?"—and perform a spinal tap whenever there is any doubt at all. Anyone who has taken care of children has agonized over this decision many times, for the disease, despite the terror it strikes into parents' hearts, is treatable. The days of intravenous therapy with the appropriate antibiotics usually will save a 3-month-old baby who would otherwise die.

In this case, however, before a doctor had a chance to consider this diagnosis, another hurdle had to be crossed: the father had to pay. At the beginning of the season there was only enough money to get to the fields in Michigan, and the father and the hospital people argued about money. In the end, a nurse gave the father an oral medicine to give the baby, and they went out, no doctor having seen the child.

They returned the next night, the baby listless and febrile, and he was admitted. Even so, the father said, no doctor saw the baby for several hours and when the diagnosis was made then, it was indeed meningitis. Intensive therapy was begun, but the baby went on to die.

The father spoke this way:

> You've got to leave a downpayment before you even leave the baby there. But he was sick, man, he was going to die. His mother, she suffered a lot. You

know, we come over here to help these folks out with the crops, and we help a lot, picking cherries and planting tomatoes, but they don't help us. And sometimes we need some help, too. That doctor didn't do anything. He knew the baby was going to die, and he didn't want to waste the money. I like white people, black people, but I don't know, man, I don't know. I went to the welfare office and said, "If my son survives, I won't have the money to get him out." And they said, "Sorry, we can't help you. You have to live here 2 or 3 years, then we will help you."

And you know, when they die, man, they are going to pay that. When they go upstairs, they are going to pay, man, they are going to pay.

How does one react to a story like that? In McAllen with all of our group I was overwhelmed by what we saw and heard. The shock anyone would feel in such circumstances, watching an endless stream of people in pain, sick, crippled physically and emotionally, and drowned in apathy or bitterness or even one heartbreaking individual, like the 13-year-old boy I saw who had gone blind in Texas over several years without ever being properly evaluated or offered any rehabilitation, that shock was doubled because as a doctor I saw how much of what I saw was preventable. How many times I have treated and seen cured patients with the same conditions as we saw there, but who would not—because they happened to have money or just happened to be living in Boston—would not grow deaf because there was no medicine for their chronic otitis, or get dehydrated and die because there was no doctor nearby who would treat their diarrhea, or just endure a life of pain for want of analgesia, or anxiety for want of any medical comfort or pharmacologic relief.

That is why I have presented these cases in the medical detail I have, to share with you the waste and horror a doctor feels seeing treatable diseases go, untreated, their crippling way.

After the initial shock, back in Boston, the mind strains every faculty to repress the shock, to blur over the agony, because you can't live with those perceptions all the time and sleep well. And if the mere perception does that to us, imagine what the living of it does to the migrant. The invisibility of the migrants nationally, our ignorance of them as they travel among us and load our tables with fruits and vegetables in abundance undreamed of two generations ago, is, like all such ignorance, as Gunner Myrdal has said, opportunistic. It is how we keep going.

Senator YARBOROUGH. I think that is something well said, pointing out we didn't have this abundance of fruits and vegetables in this Nation two generations ago. Apples in many middle-class families were something you had at Thanksgiving and Christmas and not normally each day of the year.

I think this abundance makes this deprivation of the workers more tragic.

Dr. HARPER. But if you can hold on to this vision, or be refreshed by rereading your notes, or looking at the slides once again, or reviewing it all, as we have preparing for these hearings, with the friends and colleagues with whom we shared the experiences originally, the meaning of the migrants' lives is unmistakable. Our country, the system, the way things are, or, to drop the depersonalized dodge—all of us—build the highways and the rockets and the bombs, pay for empty fields and subsidies to the rich, but have not, will not or cannot guarantee children in our midst the elements of growth—food, health, and hope.

Human needs, for those outside of our affluence, fall far down our unstated list of national priorities. The pyramid of institutionalized selfishness we call our national system cannot by the farthest stretch of the imagination be considered to maximize human welfare, despite the propaganda with which we surround ourselves. For as we do so unto the least of these, we used to say.

The realization of this fact takes a strong cold grip on reality, a grip hard to maintain in comfortable caucus rooms like this or in the insulation which seems to cut this Capital off from other parts of the country; and it is hard in our hospitals, where we keep busy helping those who make it to the door. Terrible is the seductive power, to paraphrase Brecht, of that goodness which we do.

What does one do with such a perception? If it is correct that the diseases we have described come from the facts of poverty, migration to find work, and racial discrimination, and that a culture valuing property more than people is the ultimate barrier to changing these pathogenic factors, one can either become a prophet of the apocalypse —which is the perception behind the disaffection of young people supposedly being studied now, or one may despair completely of change, which is the nihilistic possibility.

If, however, one is disinclined emotionally or politically to both revolution and resignation, then the only answer is to enfranchise the migrants with that one item for which the rest of the country seems to respect people—money. Of the practical means for achieving that—the organization of the agriculture workers—the subcommittee is well aware.

But I would say in closing, that if the only way to insure simple dignity, self-respect, and health for our brothers is to wait until they can buy their way into a place in our national sun, that is a terribly sad commentary on the moral economy of our country.

Thank you, Mr. Chairman. [Applause.]

Senator MONDALE. Thank you, Dr. Harper, for a most moving statement. It is unfortunate that the printed hearing record will not show that we have a packed, standing-room-only hearing room, and that most everybody has been sitting in an emotional daze, listening to the eloquent recital of facts, figures, statistics, and conclusions documenting, as perhaps never before, the extreme tragedy of this situations. Doctors Wheeler, Lipscomb, and Harper have performed a great public service.

Senator Yarborough?

Senator YARBOROUGH. I have no questions at this hour, Mr. Chairman. We have other witnesses and it is nearly 1 o'clock. I want to thank Dr. Harper for his study, his actually going into the fields and orchards of Michigan and Texas and other States to study this and for the great sociological analysis he has given in this paper. In addition to being a factual report of the incidence of disease and lack of care, he has gone into the deeper psychological and social bases and the mores of the American people to an extent that it is a great contribution here.

I just wish that 204 million people could have heard it.

Senator MONDALE. Senator Saxbe?

Senator SAXBE. I want to thank Dr. Harper. I think his observations and contributions here should be evidence that there is a substantial group of young doctors who are interested in correcting these problems. I hope that they don't become distracted and forget this as they go on down the road.

I know that the attractions of pediatric practice in a large city are great. I just hope that you will dedicate yourself, when you go into practice, to patients in such poverty areas and make a contribution to them.

Senator MONDALE. Thank you, Senator.

First of all, permit me to express my deepest appreciation to this panel and to your colleagues for undertaking this long overdue, but extraordinarily compelling, survey. You can argue a great deal about the plight of the migrants. You can't argue about the scientific findings of doctors who have examined the sick and the hungry.

I would like to come away from this hearing with a sense of hope that things are going to happen about the outrageous, immoral treatment of human beings. The truth of it is that hearings like this, public presentations like this, have occurred time and time again. Instead, I think we enjoy feeling sick and morose over the problems of the disadvantaged to the point that they are becoming deeply resentful when we even come to talk to them, because they say, "Here they come again."

The established American society has worn out the grass in every one of those barrios in every one of our reservations, in our ghettos talking to the disadvantaged. We have seen it all.

There is no mystery to any of this any more. Out of all of this comes a theme that wherever you find the powerless, you find a tragically disadvantaged people. The details vary but the results are the same: rotten insensitive education, inadequate or nonexistent health services, lack of unions, no right to speak up, poor law enforcement, substandard and unsafe housing, often racism, and many other things.

The capacity of our society to mangle people who lack the power to stand up for their own rights is virtually limitless. I think that we must not pursue the old strategy of assuming that another paternalistic program is going to work. Somehow the disadvantaged have to be empowered with a right to speak for themselves, they must be empowered with the right to do for themselves, and those rights must be given, not as a hoax, but without repressive government program interference, because that is how we made it.

I think that is the only way they are going to make it, whether it is the power of the dollar bill that gets them into clinic or hospital, or whether it is political power to gain access to the school board and to the other public bodies, that deal with the problems of the Mexican-American, or the problems of the Indians, or special problems of the other disadvantaged, many of whom are white.

We can no longer assume that simply because we have a moment of outrage to inhuman, immoral treatment that much action or power to the poor will flow from that understanding. The migrant has been accustomed to the syndrome of the traveling liberal now for 50 years. Many of them said they were very grateful to some of our most recent tours, because they had not been visited since Eleanor Roosevelt or since John Steinbeck or since Edward R. Murrow.

But the conditions are the same, the problems are the same, the human tragedy is the same. It is very nice for us to talk about it. But in the lives of these millions who suffered and died in the past, and who live now it is the unutterable tragedy which you have defined. Somehow our institutions and somehow American attitudes have to be jolted so that we realize the very real limitation of paternalistic "good works," so that we are willing to permit the disadvantaged to have those tools, those rights, those funds, necessary to speak up for themselves, without which our lives, too, would be miserable.

I thank this panel for describing in ways that cannot be argued the damage and destruction and the debt we visit upon hunndreds of thousands of fellow Americans who lack that capacity to speak for themselves.

Senator SAXBE. Don't you feel that we the people who consume the products—the cucumbers, strawberries, the sweet corn—that we contribute to this; and if we cannot enjoy these things without the exploitation of people, that maybe we should do without? Do you get that feeling as you go through these fields?

Dr. WHEELER. I sort of do, Senator. The people we have been talking about today make it possible for us to enjoy a standard of living and diet that we have not been accustomed to in past years. Although I am certain that the growers and the farmers have their very definite and real problems in producing their crops and marketing them, the fact that they say they have to pay the kind of wages they do and provide the kind of living conditions they do to produce this crop and get it to the table of the average American is absolutely no excuse for the kind of things we have described to you today.

We must find ways to make it possible to have that food and that fruit we need, but not at the expense of human being. I am sure ways can be found to do that.

Senator MONDALE. I am advised that we have a live quorum call on the Senate floor. It is now 1 o'clock. If Dr. Love's schedule permits, we will reconvene at 2 o'clock.

Once again I thank you and I thank your colleagues. I thank the foundation for its work and I would like to include at this point in the record a statement by Dr. Senn of Yale University, who also speaks very effectively on this same problem.

(The prepared statement of Dr. Senn follows:)

PREPARED STATEMENT OF DR. MILTON J. E. SENN, YALE UNIVERSITY, NEW HAVEN, CONN.

My concern is with the long-term effects of nutritional and psychological deprivation. Studies of people who are underfed show that this leads to starvation and malnutrition, even death. Inadequately fed pregnant women give birth to babies who are undersized, have an inadequate development of the central nervous system; and if the underfeeding persists, this leads to a predisposition of other diseases, especially infections, and to a variety of deficiency diseases involving the skin, the mouth and teeth, the hair, and a variety of internal organs.

There are at least three ways in which inadequate nutrition impairs learning. The first, is through a direct effect on the developing nervous system in utero and in the postnatal and weaning periods. Such impairment of growth and differentiation of the central nervous system is disturbed in a way that is not corrected by feeding at later ages. The second way, in which nutrition affects child learning is by making him susceptible to infections, again with some possibility of central nervous system damage. Thirdly, malnutrition affects learning by interfering with the energy levels, the level of attention: and a direct consequence of this is a diminution in the number of days of school attendance, often leading to school drop out.

Underfeeding also leads directly to the development of behavior problems, some of which may be classified as anti-social acts and delinquency.

In examining the families in Texas, I was impressed with the number of complaints from the adults about backaches, headaches, abdominal pain, and lassitude. A number talked about being chronically depressed and discouraged. I do not think it too farfetched to consider these conditions psychosomatic illnesses, directly ascribable to the living and working conditions of the patients.

I conclude, that malnutrition and other conditions of health represent intergenerational or transgenerational problems. The degree to which a child is at risk in health, and in psychological development, must be considered not only in terms of the contemporary circumstances in which he is living and the details of his own history, but also within the context of his parents' physical status and their own developmental and psychological histories. The relationship this is cyclical and intergenerational. There is a contagiousness of the spirit and anxiety and hopelessness from parent to child as well as a contagion of infectious disease.

Physicians as well as those other people, such as members of Congress, who are concerned with the health of our people, must then be concerned not merely with change in a given generation, but with the intergenerational influences on health. Malnutrition is not a crisis phenomenon in Texas among the migrant workers. It has become a condition of life; stable, persistent, pervasive, ever endangering the health of scores of people. What we must develop are means of implementing our concern by remedial and preventive measures which will affect all facets of health, across the generations, in order to assure subsequent generations of being free of the serious ills now overpowering members of this generation.

EFFECTS OF DEPRIVATION (NUTRITIONAL, PSYCHOLOGICAL) IN PREGNANCY, INFANCY AND EARLY CHILDHOOD

1. Nutritional deprivation:
    - Underfeeding:
        - Starvation and malnutrition.
        - Death.
        - Growth retardation.
        - Inadequate development, especially CNS.
    - Inadequate feeding:
        - Vitamin, protein, mineral deficiencies.
        - Many Deficiency Diseases.
        - Predisposition to other diseases, especially infections.
    - Overfeeding: Obesity.
2. Psychological deprivation:
    - Underfeeding:
        - Hunger.
        - Intellectual impairment:
            - School learning problems.
            - School drop-out.
            - Poor work records.
        - Behavior problems:
            - Anti-social acts.
            - Delinquency.
        - Mental Illness:
            - Psychosomatic illness.
            - Depressions.
            - Drug abuse.

Senator YARBOROUGH. Gentlemen, you have made a great contribution. I want to say to you, don't despair, because I believe as a result of the forces that have talked for 30 years, action is coming and coming very fast. This is an idea that has been talked about for 30 years.

I think it is an idea whose time has come. There are many factors moving for it. I mentioned the election of just two county judges in Texas, the greatest educational opportunities among the minority groups themselves in the field of law and political science under the cold war GI bill. They served most, they are entitled to go to school.

They are now developing a corps of their own lawyers. In 1958 we had 2.75 million students in college in America. Now it is eight million with one great deficiency. We have not increased the medical education percentagewise. It should have gone up at the same level, but medical education has been retarded insofar as numbers of people obtaining it about as much as these farmworkers.

We just haven't permitted the students of America to go to American schools. Over 20 percent of our interns in hospitals are graduates of foreign medical schools. Over 30 percent of the residents in hospitals are graduates of foreign medical schools.

We have denied American young men and women the opportunity to get the American education that would let them treat the ill of America. As Dr. Harper said, it is going to take more than just the medical doctors out there to treat these people. It is going to take more than nurses. The country seems to respect most, he says, money.

We have to get money in their pockets. I think the country is moving to that and moving very, very fast. I don't think, Senator, we will sit here another 30 years or 10 years or 5 years. I think that for whoever is around that this idea has come and this kind of shame of America has to be lifted as a blight from this land.

Senator MONDALE. Thank you very much, gentlemen, for your most compelling testimony.

Without objection, I order printed in the hearing record the full text of Dr. Harper's remarks, along with a report on his visit to the Connecticut River Valley.

(The information referred to follows:)

PREPARED STATEMENT OF GORDON HARPER, M.D., TRAINING IN PEDIATRICS, BOSTON, MASS.

My name is Gordon Harper. I am a physician, in the second year of pediatric training in Boston. I participated in the March trip to McAllen, Texas, and, because the Northerner sojourning and muckraking in the South is legitimately suspect in both Southern and Northern eyes, I have since visited other areas where migrants live and work in Connecticut and Michigan.

Much testimony has already been presented about the number of patients we saw in McAllen, the kinds of diseases they presented, and how these conditions arise from poverty and discrimination. I would like to present a particular case to illustrate what we are talking about.

A BABY WITH CELLULITIS

The first day we were working in Dr. Casso's clinic, a young mother from Pharr brought in a baby, perhaps a year and a half old, complaining that his head and neck were swollen. He had been well, she told us, until three days previously, when insect bites on his scalp became infected. During the succeeding days, the infection spread and the baby grew less active and was not eating well. He developed a fever and now just lay about, showing no interest in those around him. Examining the baby, we found him well developed and fairly well nourished, but acutely ill, "toxic" as we say, lying motionless on the examining table. His temperature was 106°, his pulse was rapid and his respirations labored. One side of his scalp and neck was red-hot, swollen, and weeping. Huge lymph nodes were palpable in the adjacent areas. Pustules in his scalp, the likely location of the insect bites to which the mother referred, seemed to be the source of the infection. This was cellulitis, a bacterial infection of the skin and subcutaneous tissues, with probably spread of the infection throughout the baby's body—sepsis. We had a very sick baby on our hands.

What had this infection to do with migrant labor? First of all, it began with insect bites, a familiar summer affliction for all of us, but much more common among children who live in substandard housing. In Texas, all of us saw windows without screening, open latrines, inadequate garbage disposal, standing water, and gaping holes in floors and walls. We saw carrot chips used as ground cover—garbage in the front yard. In Michigan I visited a migrant camp, near the Aunt Jane Pickle Factory, a Borden subsidiary, built literally right next to a municipal sewage pool and garbage dump. The stench was suffocating. On all these conditions, insects and rodents thrive and attack children playing or sleeping nearby. Moreover, once exposed to such bites, babies are much harder to keep clean, and the bites are more likely to be infected, if homes have no running water. Not surprisingly, then, both in Texas and Michigan, infected bites are one of the most frequent conditions found in migrant children, directly related to the conditions they must live in. And so was this baby's initially trivial infection.

Secondly, the infection, developing over two days, received no medical attention until the mother came to us on the third day. Superficial skin infections are common problems of children in Boston or Washington as in Texas, especially when the weather is warm as it is most of the year in the Rio Grande Valley. Treated promptly, with good cleansing, a clean dressing, and antibotics as indicated, such an infection should never reach the proportions we found in McAllen. But we learned there, as you are hearing today, how seldom poor people there see doctors. A visit to a private doctor can cost $10, plus charges for medicines. Dr. Casso has been one of the few physicians in McAllen who would see patients who could not pay, and we have seen under what a heavy case load he functions. This mother, like so many, knew of no free dispensary; there was no outpatient department or free emergency ward like those which we take for granted in the rest of the country, to which she could go. And the mother was reluctant to travel to Mexico, where many obtain cheaper and more sympathetic care, with a baby so ill. I would like you all to understand how it was very difficult for us to believe, as this mother had long since learned, that there was no place, convenient and close by, where she could take her baby when he was sick and she had no money. That is how a minor infection became a life-threatening one.

The third part of this baby's case now unfolds: what could we do about it? Again, in any of the emergency wards where we have worked, where we have been on hand to treat whoever came in, without asking who could pay or how much any indicated therapy would cost, this baby would have been hospitalized and antibiotic therapy begun without delay. But in McAllen we had to ask who could pay. The answer was that there is no Medicaid program in Texas for those not already covered under categorical welfare programs, that there are no free beds in the local hospital only one block away, and that a deposit is required for a patient's admission to that hospital. Many people in McAllen, as we will document, have been told after the birth of a child in hospital: "You pay the bill or we keep the baby." What did we do? The baby received antipyretics and a large intramuscular injection of antibiotics and was observed for six hours in the office. He then looked much better, was given another dose, and was sent home to return next day. This therapy, good bush medicine dictated by expediency, "worked" this time, but is hard to justify one block from a general hospital, the McAllen General Hospital.

Every parent of a critically ill child, faced with a disease beyond the control of aspirin and cough syrup, feels helpless and alone; for this baby's mother, however, such helplessness was compounded by three facts equally beyond her control, which should have had nothing to do with her baby's getting sick or being treated—and yet which, as we have seen, had everything to do with both: the family was poor, they were migrants, and they were Chicanos in Texas.

THE WAGES OF CONCERN

That was a piece of our experience in Texas. In Michigan, one week ago, I visited several counties where families from the Lower Rio Grande Valley—some of the same families we had seen in March in McAllen—have been picking the strawberries, are now working in the cherries, and soon will begin work with the cucumbers and tomatoes destined for our tables. In several ways, life is a bit less harsh for them there: they have some work; a food stamp program makes it more likely that they and their children may have enough to eat and several counties have programs of medical care. But their housing, in camps maintained by the growers, is often worse than they knew in Texas; I visited a camp on the Old Mission Penninsula where 17 people were living, sleeping, cooking and eating in two rooms 8 by 18 feet under a leaking roof. Most importantly, however, the feeling of not being at home, of not belonging, of not being a part of the counties where they work, or of the country which enjoys the fruits of their labor—that feeling is still there.

The efforts of the state of Michigan and of many voluntary organizations to improve the migrants' lot is at this time, even last week when I was there, being actively opposed by those who control most aspects of the migrants' lives, the growers. The facts are simple. Federal and state housing codes set standards for migrant camps which must be met before a camp can be licensed to receive migrant-tenants. A federally funded program sponsors law students who act as legal advocates for the migrants in housing and other areas. By reporting alleged violations of the codes to a county health department, a law student earned the wrath of a grower who regarded such action (not only legal but sponsored by the government) as a challenge to his right to run "his" camps and make a profit from the work of "his" migrants as he wished. The night before I arrived in Michigan this grower, finding the student in question in one of his camps, where he was visiting friends who were tenants there, assaulted him physically. When the student escaped with his friends, leaving his care, the grower broke all the windows in the car with a steel pipe. The atmosphere the next day was tense: "For the first time in five years," said one veteran of the migrant programs, "I'm afraid someone's going to get killed."

The next day I got a taste of the same treatment. I was speaking to migrants at the side of a road, on the edge of a camp, when a grower drove up and ordered me off the premises. He boasted that he had known within three minutes of my arrival via a fleet of cars with two-way radios which the growers maintain for surveillance, that a stranger was visiting one of his camps. He accused me of trying to ruin his business by "snooping" among the workers, and threatened me with physical harm should I make any more visits to "his" migrants' camps without his approval. "If those do-gooders come on any of my land," he said, "they're never going to make it back to Lansing."

The attitudes of these rough-and-ready growers toward the workers on whose labor their profits depend, and will continue to depend, despite their headlong and much touted rush to mechanized harvesting ("We won't need all these hands a year or two from now," they argue, with the self-appointed plausibility characteristic of the man trying to justify the saving of money at the expense of human health or dignity; "And so why should we invest a lot of money in housing for them now?" are the same as the committee has heard before, and will hear again today and tomorrow, from the dominant classes in Texas and Florida. All of these attitudes serve one selfish purpose: to absolve the grower of any responsibility for the obvious and infamous short life expectancy and apathy which are the migrant's share of the American way of life. The grower will be absolved, of course, if the migrant can be successfully banished from the circle of our sympathy for such is the outcome of prejudice, whether racial, cultural, or economic in the case of Chicano migrants in Michigan, of course, it is all three.

To serve such a purpose, the migrants are dismissed as slovenly. "They live like animals," say growers who give them shacks to live in.

Or again, the growers tell us, "The migrants *like* to travel; they like to drive around and see the country, to get out of the heat of Texas in the summer, to come up to the Midwest to swim." Migrants, of course, can be found who will say they like to travel, but too many mothers show despair as they tell of having to take children out of school in early May, to begin again only in November, to believe the myth of the happy gypsy. How that myth can withstand the image of 33 people and their belongings traveling 1500 miles in an enclosed truck, with children who need rest stops every 45 minutes, to pick cherries for eight dollars a day, is a wonder of public relations beyond my comprehension.

Or the migrants, they say, are deadbeats. "I've seen one mail a money order for $500 to Texas the same day he buys $100 worth of food stamps," complains a grower whose indignation at the spectacle of government subsidies does not extend to the payments he and his fellow growers do not hesitate to cultivate.

With the migrants excluded by all these devices from the range of their sympathies, growers are able to indulge in self-pity; they have a huge personal sense of grievance, of being put upon, of not getting what they believe they are entitled to, but the scale of these grievances can only be called grotesque compared to the wasted bodies, destroyed spirits, and shortened lives which are the migrants' lot. One complains, "With what I've got invested, and what I could earn on my own, shouldn't I be getting $60,000 a year, not just $40,000?"

With such an acute sense of personal grievance, a grower may have little sympathy left over for those around him. "Babies die all the time," says one grower, when asked about a notorious case of a nine-month-old who died last year of diarrhea and dehydration, after being refused admission to a hospital in Southwest Michigan; "why should they get so excited when one dies here?"

From this testimony and that presented today from Texas, a picture emerges of the channel in which the migrant stream flows from Texas to the Middle West: it is a hard journey through a land where money and profit move men's hearts more than does human misery, and where all kinds of self-serving rationalizations and spurious slurs on the migrants themselves seek to conceal the fundamental facts of human poverty and need, and justify indifference to them or support active interference with those who come to act on the migrant's behalf.

The kind of information the self-styled vigilantes would keep us from gathering, and the kind of tragedies which mark the migrant's travels, are illustrated by the following case history.

AN IRRITABLE BABY

In Traverse City, I learned from a young father of the illness last month of his three-month-old son. While traveling through Indiana enroute to Michigan, where his family would begin the strawberry season, this baby developed diarrhea, fed poorly, and became irritable. Diarrhea and poor feeding are common pediatric symptoms, especially in the Chicano population, where infantile gastroentitis still accounts, as it did one generation ago in the population at large, for the largest part of infant mortality. This very month, when the rest of the country has been congratulating itself on the fact that no one died last year from poliomyelitis, the most serious of the enteric viral infections, three deaths from polio have occurred in South Texas. In the absence of immunization, polio has the same epidemology, the same relation to poor sanitation, as the less dramatic forms of viral diarrhea. The unprotected outhouses, homes without plumbing, contaminated water supplies, and fields without toilet facilities already mentioned explain the frequency of these diseases; poor nutrition—the protein and vitamin deficiencies we have reported—and lack of adequate care account for the death rate in the easily treated simple diarrhea. But the other complaint, irritability, is one that gives every doctor pause, because of the possibility of meningitis. Small babies often do not show the physical findings, like stiff neck or resistance of flexion of the leg, which we look for when adults have infections of the meninges, and often the characteristic sign in infants, the bulging fontanel or soft spot, is absent despite the presence of infection. To make the diagnosis, therefore, the doctor has to be suspicious, to size up the baby as a whole, (asking, "Does he look sick?") and perform a spinal tap whenever there is any doubt at all. Anyone who's taken care of children has agonized over this decision many times, for the disease, despite the terror it strikes into parents' hearts, is treatable. Ten days of intravenous therapy with the appropriate antibiotics usually will save a three-month-old baby who would otherwise die.

In this case, however, before a doctor had a chance to consider this diagnosis, another hurdle had to be crossed: the father had to pay. At the beginning of the season, there was only enough money to get to the fields in Michigan, and the father and the hospital people argued about money. In the end, a nurse gave the father an oral medicine to give the baby, and they went out, no doctor having seen the child. They returned the next night, the baby listless and febrile, and he was admitted. Even so, the father said, no doctor saw the baby for several hours and when the diagnosis was made then, it was indeed meningitis. Intensive therapy was begun, but the baby went on to die.

The father spoke this way:

> You've got to leave a down payment before you even leave the baby there; but he was sick, man he was going to die. His mother, she suffered a lot. You know, we come over here to help these folks out with the crops, and we help a lot, picking cherries, and planting tomatoes, but they don't help us. And sometimes we need some help, too. That doctor didn't do anything, he knew the baby was going to die, and he didn't want to waste the money. I like white people, black people, but I don't know, man, I don't know. What do they care about, just money? They don't care about us. I

> went to the Welfare Office and said, "If the kid survives, I won't have the money to get him out." And they said, "Sorry, we can't help you. You've got to live here two or three years, then we'll help you." I'll tell you something, man, I'm not going to that state of Indiana any more! They don't care about anybody. They don't help you at all. And you know, when they die, they're going to pay that. When they go upstairs, they're going to pay.

How does one react to this kind of spectacle? In McAllen, with all of our group, I was overwhelmed by what we saw and heard. The shock anyone would feel in such circumstances, watching an endless stream of people in pain, sick, crippled physically and emotionally, and drowned in apathy or bitterness or even one heartbreaking individual, like the thirteen-year-old boy I saw who had gone blind over several years without ever being properly evaluated or offered any rehabilitation, that shock was doubled because as a doctor, I saw how much of what I saw was preventable: how many times I have treated and seen cured patients with the same conditions as we saw there, but who would not—because they happened to have money—or just happened to be living in Boston, would not grow deaf because there was no medicine for their chronic otitis, or get dehydrated and die because there was no doctor nearby who would treat their diarrhea, or just endure a life of pain for want of analgesia, or anxiety for want of any medical comfort or pharmacologic relief. That's why I've presented these cases in the medical detail I have, to share with you the waste and horror a doctor feels seeing treatable diseases go, untreated, their crippling way.

After the initial shock, back in Boston, the mind strains every faculty to repress the shock, to blur over the agony, because you can't live with those perceptions all the time and sleep well. (And if the mere perception does that to us, imagine what the living of it does to the migrant.) The invisibility of the migrants nationally, our ignorance of them as they travel among us and load our tables wth fruits and vegetables in abundance undreamed of two generations ago, is, like all such ignorance, as Gunner Myrdal has said; opportunistic. It's how we keep going.

But if you can hold onto this vision, or be refreshed by re-reading your notes, or looking at the slides once again, or reviewing it all, as we have preparing for these hearings, with the friends and colleagues with whom we shared the experiences originally, the meaning of the migrants' lives is unmistakable; our country, the system, the way things are, or, to drop the depersonalized dodge—all of us—build the highways and the rockets and the bombs, pay for empty fields and subsidies to the rich, but have not, will not, or cannot guarantee children in our midst the elements of growth: food, health, and hope. Human needs, for those outside of our affluence, fall far down our unstated list of national priorities. The pyramid of institutionalized selfishness we call our national system cannot by the farthest stretch of the imagination be considered to maximize human welfare, despite the propaganda with which we surround ourselves. For as we do so unto the least of these. . . .

The realization of this fact takes a strong cold grip on reality, a grip hard to maintain in comfortable caucus rooms like this or in the insulation which seems to cut this capital off from other parts of the country; and its hard in our hospitals, where we keep busy helping those who make it to the door. Terrible is the seductive power, to paraphrase Brecht, of that goodness which we do.

What does one do with such a perception? If it is correct that the diseases we have described come from the facts of poverty, migration to find work, and racial discrimination, and that a culture valuing property more than people is the ultimate barrier to changing these pathogenic factors, one can either become a prophet of the apocalypse—which is the perception behind the disaffection of young people supposedly being studied now. Or one may despair completely of change, which is the nihilistic possibility. If, however, one is disinclined emotionally or politically to both revolution and resignation then the only answer is to enfranchise the migrants with that one item for which the rest of the country seems to respect people: money. Of the practical means for achieving that—the organization of the agriculture workers—the subcommitee is well aware.

But I would say in closing, that if only to ensure simple dignity, self-respect and health for our brothers is to wait until they can buy their way into a place in our national sun, that is a terribly sad commentary on the moral economy of our country.

JULY 20, 1970.

Hon. WALTER F. MONDALE,
Chairman, Subcommittee on Migratory Labor, Committee on Labor and Public Welfare, U.S. Senate, Washington, D.C.

DEAR SENATOR MONDALE: Attached are my observations after visiting the Connecticut River Valley and the labor camps there, where the Puerto Ricans who pick the tobacco are housed, fed, and virtually incarcerated.

Perhaps you would be interested in including this in the hearing record of the day on which I appeared with the Field Foundation doctors.

Sincerely,

GORDON HARPER, M.D.

REPORT OF GORDON HARPER, M.D., BOSTON, MASS., ON HIS RECENT VISIT TO THE CONNECTICUT RIVER VALLEY

In the Connecticut River Valley, the Land of the Shade Tobacco Growers Association

Driving from Boston to New York, in the valleys of central Connecticut the motorist sees large fields covered with mosquito netting which he may or may not know are tobacco plants destined for cigarmaking. He probably doesn't know that the acreage in tobacco has declined since World War II, as industry and suburbia spread over the field, or that most of the labor force, once local New Englanders, immigrants of children of immigrants—is now recruited seasonally in Puerto Rico. Several thousand Puerto Ricans work here from May to November.

The camps they live in are well concealed: several hours of driving on main and side roads, in areas full of tobacco, fail to locate a camp. By asking Puerto Ricans in the area one gets directions: to a small town where the only sign that several hundred seasonal workers live nearby is a large sign in the center of town, in English, and Spanish: No Loitering, No Littering. Thence, a mile or so from town up a gravel road to the camp, set in the woods. Behind a high chain-link fence one sees immaculate grounds, with well-trimmed lawn, climbing roses, and tall shade trees surrounding neatly kept barracks. A huge sign warns the passerby that only official cars may enter, that all others must stop at the office, and a guard inside the fence enforces the message, grumbling answers to questions and keeping the visitor from entering any building. He also discourages workers from speaking to the stranger.

Placards express the same mood: they say in Spanish: "Danger! Danger! Danger! Don't sit on the curb. Trucks go by very fast. We are not responsible if onyone is hurt." "Don't hang around the office if you have nothing to do; go back to your bunk and rest. Others have work to do." "In the cafeteria, take your tray back to where it belongs or else you will be fired." The men around the office have got the message: with sideways glances at the office, they pass by, or grunt an answer to an inquiry. I can't remember ever being in a place where fear so visibly kept men from speaking, but this is what I imagine a police state must be like. Only at the liquor store in the nearby town is it possible to talk to the men in this camp and get an idea of what their lives are like.

Recruited in Puerto Rico, men come to Connecticut in May for a season which will last till November or December. They must come alone, leaving wives and children perhaps in nearby Hartford or Springfield, but more likely in Puerto Rico. During the season, they have only single days off: visits home are impossible. They are paid $1.75 per hour, from which about $20 are deducted weekly for room, board, and medical services. "I'd prefer to work in Puerto Rico," one told me, "but field work pays only $1.30 there; I used to make good wages in a factory there, but there's no work there now."

Here, however, they enjoy neither contract nor job security. One man estimated that of five hundred men beginning the season, only one hundred will still be around in November; others will have been recruited to take the places of those who have left—either voluntarily, when fed up with the food or the isolation, or involuntarily, when fired. Any grievance, real or imagined, suffices for dismissal. "You can't do anything here, it's like being in jail," I was told. "Yes, like being in a jail." "If anybody talks back or complains about the food, he can be fired. Most of the time, though, you never know why somebody has been fired; the next day, the bed's just empty. People are too embarrassed to tell you what happened." There is no grievance procedure for the worker, needless to say; no opportunity for redress.

I did not see the camp food about which so many complained, but it's said that workers walk more than a mile to the grocery store in town to buy food, trying to make up in quality or quantity for what they are offered in camp.

The only escape from the isolation, oppressive atmosphere, and questionable food of the camp is to come to town, buy a beer, and, holding it surreptitiously in a paper bag, drink it at the side of the road. A sidewalk is the only gathering place and even there the state police last year harassed the workers so much that liquor sales fell off. Even along the roads to town, they chased the workers back up into the camp. This year there has been less harassment, but the feeling of being unwelcome still prevails.

"Can't a man relax a little after a day working in the fields?" the workers asked me. "Have a drink and a good time with his friends?" They argued, "You're from here, right? Now, if you went to Costa Rica or Venezuela, and didn't know what to do or how to behave, and without telling you anything, the police came up and started pushing you around for not acting the way they do there, that wouldn't be right, would it? Well, why don't they give us a chance?"

At a time when even the federal government is finally beginning to act to protect society's interest in the stability of the family, a work program—the only place where men can find work—which takes them away from their families for six months of the year is surely nonsense; it is also punitive and cruel. Equally cruel are the conditions which make men feel like prisoners and unwanted strangers in the country of which they are citizens.

One worker told me about the subsidies, loans, and technical assistance which he has seen given to Cuban refugees in Puerto Rico: "Why do they give them all that money," he asked, "and nothing for us?" "No, you don't understand," added his friend, another Puerto Rican. "They have been defeated, so we have to help them. It's like Korea or Vietnam, you know. When they're down, you have to give a hand."

Three times as I talked to these men I was asked whether I was from the state Department of Labor. They were disappointed when I was not. They said, "They should come and see how things are here. Not just with the boss, either; you know what people say then. Come and see how things really are. People getting fired, terrible food to eat. No rights at all. Sometime they should come here and see."

Senator MONDALE. We stand in recess until 2 o'clock.

(Whereupon, at 1 p.m. the subcommittee recessed, to reconvene at 2 p.m. of the same day.)

AFTERNOON SESSION

(The subcommittee reconvened at 2 p.m., Senator Walter F. Mondale, chairman of the subcommittee, presiding.)

Senator MONDALE. We will come to order.

We are pleased to have Dr. Carl R. Love, president of the Hidalgo County Medical Society, McAllen, Tex.

Senator YARBOROUGH. Since you are a constituent of mine, it gives me great pleasure to have the honor of introducing you to the committee. You are the president of joint Hidalgo and Starr Counties Medical Society?

STATEMENT OF CARL R. LOVE, M.D., PRESIDENT, HIDALGO COUNTY MEDICAL SOCIETY, McALLEN, TEX.

Dr. LOVE. Yes, sir.

Senator YARBOROUGH. It is a great pleasure to welcome you here. You are a graduate of Baylor Medical School in Texas?

Dr. LOVE. No, sir, I am a graduate of Harvard Medical School. I had my postgraduate at Baylor.

Senator YARBOROUGH. I thought from Dr. Lipscomb's statement he knew you from Baylor.

Approximately how many physicians do you have in Hidalgo County?

Dr. LOVE. Yes, I have known Dr. Lipscomb. We have approximately 88.

Senator YARBOROUGH. Approximately 88. How about Starr County?

Dr. LOVE. They say five, but probably two or three in active practice.

Senator YARBOROUGH. Thank you very much, Doctor.

Before turning this back to Chairman Mondale to ask you to proceed with your statement, I want to say, Chairman Mondale, you and I have been to that county on official hearings. We have been at informal inspections at barrios. People call them "colonias" down there. I don't know the difference between a "barrio" and a "colonia," but I understand a barrio was close to a city.

I won't get into semantics. What do you call them where the migrant workers live in the valley? What do the English-speaking people call those areas?

Dr. LOVE. Colonias. I am not sure I know what a barrio is myself. I think it is something like a city, city located.

Senator YARBOROUGH. In Latin America they call them a name that means parachutist in English. Mr. Chairman, Hidalgo County, despite the absence of any large city from the county, is so heavily populated with small cities and rural areas that it is the ninth most populous county in the United States. There is no other county that reaches that big without having cities of over 100,000 population. There is a population close to 200,000 in the county.

Dr. LOVE. 206,000.

Senator YARBOROUGH. Over 200,000?

Dr. LOVE. Yes, sir.

Senator YARBOROUGH. Mr. Chairman, thank you.

Senator MONDALE. Dr. Love, you may proceed.

Dr. LOVE. Senators, I appreciate the opportunity to be here. As the kind Senator Yarborough has stated, I am the current president of Hidalgo-Starr Counties Medical Society. I am a graduate of Harvard Medical School, postgraduate at southern California and training at Baylor Medical School in Houston. I am a diplomat of the American Board of Surgery and a fellow of American College of Surgeons.

I was asked to present to you steps our medical society has taken to meet the health needs of farmworkers, the difficulties attendant thereto, and our suggested solutions.

I believe the medical need in our area will be detailed to you by other testimony. Suffice it to say that a large segment of our population receives little or no care until a medical disaster occurs, and that our situation is somewhat complicated by our proximity to Mexico.

Recognizing this, the society has sought and obtained an additional amount of money from the migrant health project to operate our outpatient clinics in the McAllen and Weslaco hospitals. Our reasons for using the hospitals for clinics were several.

First, it is the only way to virtually guarantee the continued interest and support of the majority of physicians in the county, which I believe you will agree is desirable without further elaboration. Secondly, we have been able to negotiate an agreement with these hospitals to furnish space, utilities and housekeeping free, and the use of X-ray and laboratory services at cost. This, of course, assures us of quality service with no capital investment, therefore more money for actual delivery of services.

We are hopeful of obtaining additional county (government) support. However, these negotiations are at present unsettled. Presently the opening of the clinics awaits only crystallization of organizational detail. We, as physicians, are interested in a migrant in need of medical care as well as a nonmigrant with need, and therefore have spent considerable effort to insure availability of services for all the poor.

I will briefly outline our other activities. The existing County Health Department is in sad need of reorganization. This is perhaps best exemplified by the recent polio outbreak. We have gained a foothold in this area and have every intention of rebuilding it into an efficient and competent delivery vehicle better suited to the needs of today.

We are also taking a look at our educational system. It may be that all our local school boards will need to be asked to change their methods of teaching hygiene, nutrition, and elementary sanitation. Also, it appears to me that the nutritional program may be in need of fresh ideas, since their efforts to teach nutrition and sanitation to some of our citizens is quite ineffective.

The problems we have faced have been primarily money and inertia. It has been personally gratifying to me to note that once the former was overcome, the latter was easy. In point of fact, a snowball effect seems to be occurring.

We are aware that certain deficiencies exist in the foregoing plans. However, I think that with experience and determination, they can be resolved. We are most appreciative of the continued interest of this committee, the Baylor Medical School, and Dr. Jim Turpin of Project Concern.

Our present needs, if you forgive me, are manpower, unification, and money. With a physician-patient ratio of 4,000:1 the need for doctors is desperate in Hidalgo County. In Starr County it is 10,000:1, which is a disaster. The community is literally killing the doctors. However, with an active recruitment effort this situation is being alleviated somewhat.

Everybody that knows anybody that is in the medical field starts spreading the word that they need doctors. In the past 3 months there have been a total of nine new doctors moved to our area. We are however, uncertain whether this is a result of our efforts or whether it is an accident.

Unification: I have the distinct feeling that if all Federal, State, and local efforts were placed under one authority, the resultant savings from efficiency would enable us to supply the financial resources necessary to fulfill our every objective. Comprehensive health planning may be the answer.

Money: Hidalgo and Starr Counties are quite poor. In the near term, I beg you to reverse the planned decrease of migrant funds available for inpatient hospital care. Said funds are already pitifully inadequate, and are scheduled to diminish.

Gentlemen, this concludes my formal remarks. Should you desire further comment, I am at your service.

I would like to make one remark to you, Senator Mondale. You asked about midwives this morning. I don't know how many babies they deliver, but there are 34 practicing midwives in Hidalgo County.

Senator MONDALE. How equipped are they in your opinion?

Dr. LOVE. Very poorly.

Senator MONDALE. Some of them are a positive hazard; are they not?

Dr. LOVE. I think so. Obstetrics is out of my line, but it would be my opinion that they are a hazard.

Senator MONDALE. One of the things that we heard about in our hearings was venereal disease, which is going untreated and is resulting in deformed and blind children. Is that a serious problem?

Dr. LOVE. I don't think it is a serious problem. It occurs once a year in the county. I have no statistics available to me at the present time to tell you how prevalent it is. I am sure it is prevalent.

Senator MONDALE. Senator Yarborough do you have any questions?

Senator YARBOROUGH. Mr. Chairman, before I comment, I want to thank you, Dr. Love, for taking the time from your busy practice to come here and offer this testimony and give us the benefit of this information on the movement of people in Hidalgo County.

I have interesting data taken from official reports and collected today. The Federal Government for the fiscal year 1967 spent in Cameron and Hidalgo Counties on eradication of animal disease $3,564,000. That same year for migrant health services they spent in those two counties $419,000. We spent about $9 for eradication of animal disease for $1 on migrant health care.

Now for fiscal 1968 it was unavailable. We could not find that figure. But for fiscal year 1969 we spent on eradication of animal disease, Cameron and Hidalgo Counties lumped together, we spent on eradication of animal disease in those two counties $5,502,000, and on migrant health services in Cameron and Hidalgo Counties $564,677.

So in the intervening 2 years the ratio of money spent on eradicating animal diseases went up over migrant health care to nearly 10 to 1, vis-a-vis, not quite 9 to 1 in 1967. What we do have—we do have a breakdown as between Cameron and Hidalgo, what monies were spent on migrant health services. It is not lumped together like eradication of animal diseases. In fiscal 1967 Cameron—which has a smaller population than Hidalgo—Cameron in 1967 spent $156,000 on migrant health and Hidalgo County spent $263,000.

Now by 1969 Hidalgo County was spending less on migrant health than it was 2 years earlier. It had gone down to $240,000 while Cameron was spending twice as much, from $156,000 in 1967 to $373,000 in fiscal 1969. It was spending twice as much.

Do you know why Cameron County was able to expand and double what it put in on migrant health care in those 2 years while Hidalgo County declined to $240,000?

Dr. LOVE. After that long and complicated question, I am sorry to disappoint you with the answer of "I don't know."

Senator YARBOROUGH. It would take someone in migrant health services themselves to answer that, somebody working in that division. I thought those figures were interesting.

Doctor, the physician-to-patient ratio of Hidalgo County is 4,000 to 1. What is the statewide ratio of physician to patient?

Dr. LOVE. Somewhere in the neighborhood of 1,000 to 1.

Senator YARBOROUGH. Are you sure it is that much? Are you sure there are that many doctors? We in Texas do not have the doctor-patient ratio of many States. We are below the national average.

Dr. LOVE. The thousand-to-one figure may be the national average. I do not know the ratio in Texas.

Senator YARBOROUGH. Thank you very much. As you say, this is a killing ratio. Do all your doctors come from U.S. medical schools?

Dr. LOVE. No, sir. I am trying to run over in my mind which ones. We have at least three in the city of McAllen. There is one doctor in Mission who is a graduate of a medical school in Cuba, University of Havana. He is a Cuban refugee.

Senator YARBOROUGH. Quite a number of the leading doctors have been driven out of Cuba.

Dr. LOVE. One of the prospects we have for Starr County is a Cuban refugee.

Senator YARBOROUGH. A few months ago I was at Eagle Pass where they dedicated a new hospital built with Hill-Burton funds, having only one hospital in the history of the place. At the dedication I learned that of the four doctors in Eagle Pass, a city of about 15,000—of the four doctors there, three were young or middle-aged, were graduates of medical schools in Mexico. And, of course, they were very glad to get them. They were running out of doctors. The fourth one was an Anglo doctor who went to the border in 1916 in the National Guard, from New York and, after World War I, liked it and settled there. He was over 80 and still practicing. He was the only doctor educated in an American medical school still practicing in Eagle Pass.

So great is the shortage of doctors in this country, which you gave us by this 4,000-to-1 ratio.

Doctor, you mentioned these two outpatient clinics that are being opened in hospitals. Have they actually been opened?

Dr. LOVE. Not as of now. But we are hopeful within the next, perhaps, 2 or 3 months they will. We have to get the organizational details settled.

Senator YARBOROUGH. You say the existing county health department is in sad need of reorganization. Is that one of your problems, the county health department?

Dr. LOVE. That is a serious problem. We plan to take that thing apart and put it back together again.

Senator YARBOROUGH. Can you get the help of the incoming administration?

Dr. LOVE. Yes, we have a halfway promise from the present administration.

Senator YARBOROUGH. I have no further questions. Thank you for taking the time to come here, overburdened as you are there with that doctor-patient ratio. We are glad to have your testimony.

Senator MONDALE. Dr. Love, you listened to testimony this morning of this team of doctors who were in your area working for the Ford Foundation. You yourself have delivered a very moving and tragic story of health needs of the disadvantaged in your area. Would you have any reason to doubt the accuracy of those medical statistics?

Dr. LOVE. No, I do not.

Senator MONDALE. Would you say as a leading practitioner this is a major problem which requires immediate and appropriate response?

Dr. LOVE. I agree.

Senator MONDALE. I gather, then, that your association is trying to gear up with the help of such Federal funds as you can obtain and try to deal with these problems and move swiftly toward their correction. Is that correct?

Dr. LOVE. We are going to have a good run at it.

Senator MONDALE. Do you think you have enough doctors, paraprofessionals and, just as importantly, do you think you have their support and will have their help to do the job?

Dr. LOVE. I will take the first part of that question. Everybody is short of doctors and nurses, et cetera. We have a worse shortage than most places. We have taken what action we can, but this is one of those things that we cannot count on. We are lucky if we get more doctors.

Second, the second part of your question, do I have the support of the county medical society? Yes, I do. The resolution—these medical clinics are only part of a four-point resolution that was passed by unanimous vote of Hidalgo-Starr Counties Medical Society in April, I believe.

Senator MONDALE. You have their resolution in support of the work that you are doing, but do you think you will have their support when the service is to be delivered?

Dr. LOVE. I think so. I made mention this seems to be snowballing. It really does, in terms of the participation.

This is one of the reasons why these clinics have to be put in the hospitals. If you put them in a building two blocks away from the hospital, they will soon be forgotten by the physicians practicing in this hospital. We have taken the position that there is almost no way to solve the strictly medical problems of that county unless we involve—unless we do one of two things: involve the physicians that are there or move in an army of new physicians.

Senator MONDALE. But even with such Federal help as you might obtain, this task will involve an awful lot of either free professional care or reduced fees, will it not? In short, many of your colleagues will have their choice of earning more money in traditional practice or earning less helping the disadvantaged.

Do you think many will find that alternative attractive? I am not being critical of doctors. I am a lawyer, and my profession faces the same dilemma.

Dr. LOVE. I believe the feeling on the part of most of the part is that they will do it, no matter. They will go ahead and do it, no matter what it takes.

The CHAIRMAN. Do you practice in McAllen?

Dr. LOVE. Yes, sir.

Senator YARBOROUGH. Thank you very much again.

Senator MONDALE. Dr. Love, we appreciate your presence here. We are encouraged by your leadership. We wish you well and we hope

Federal support will be forthcoming; I think your efforts require that support.

If I migh make one point. You said, "I beg you to reverse the plan and decrease"——

Dr. LOVE. For inpatient care.

Senator MONDALE. Are these funds that have been appropriated, the ones in question?

Dr. LOVE. As I understand it from the HEW people in Dallas, the plans for the migrant health funds are to increase the outpatient care business and to gradually phase out the inpatient business. I have no argument with increasing funds available for outpatient care, but it is difficult to separate outpatient care from necessary inpatient care and we have to have some money to do this.

Senator YARBOROUGH. Dr. Love, that is a matter to be taken up administratively. That was an administrative decision, to change the thrust of where they spent the money, inpatient or outpatient. We did try to write out exactly where and how you were supposed to spend the money to get the best care they could out of the limited amount of money.

It was far too little. I have gotten a bill passed to raise it within the 2 years' time to $30 million. That would double, but still it is not enough. But we did not attempt to tell the executive officials just where to spend it, whether outpatient or inpatient. So that is an administrative matter.

I agree with you if you spend less money on a certain program, you are not going to get as much care out of it.

About these hospitals. There has been previous testimony that the valley is threatened with eminent closure because of their inability to stay open without treating medicare patients. Are you familiar with that ruling in your own work where you deal with the hospital? Are you in any administrative capacity on any physicians board that keeps up with these rulings on medicare?

Dr. LOVE. No, sir.

Senator YARBOROUGH. You are not familiar with what the basis of that ruling is. Whether claim it is statutory construction, or is it because they claim there is no licensed practical nurse on duty 24 hours a day?

Dr. LOVE. The one active hospital in Starr County is Casino Ramirez' hospital. He is being forced to close his hospital because he was required to buy a $60,000 compressor. He was being forced to buy because of structural requirements a compressor costing $60,000.

Senator YARBOROUGH. And could not afford that?

Dr. LOVE. He could not afford it.

Senator YARBOROUGH. And that hospital will close?

Dr. LOVE. It is going to; yes, sir. I might add that Starr County has passed a bond issue in order to build a county hospital. I don't know how far along they are with their Hill-Burton application, but from my experience it is a minimum of 3 years before they will open the doors.

Senator YARBOROUGH. It will be a tragedy to close that hospital. It is better to have inadequate care than none at all.

Dr. LOVE. That's right.

Senator YARBOROUGH. It is a tragedy to the people to close this.

Dr. LOVE. That is correct. Dr. Ramirez ran a good hospital, I might say, for a fellow out there in the middle of nowhere, trying to practice good medicine.

Senator YARBOROUGH. I grew up in a rural town 25 miles from the county seat. The doctors performed operations in their offices, with no hospitals in the county.

Senator MONDALE. Thank you, Dr. Love. We wish you well.

Tomorrow morning we will have as witnesses Mr. Moore, executive director for the project on corporate responsibility, Washington, D.C.; Joseph Segor and Rudy Juarez of Florida; also Efrain Fernandez and Roger Dunwell, Rio Grande Valley, Tex.; and Clay Cochran, executive director, Rural Housing Alliance, Washington, D.C.

We hope to ask of these people some tough questions about if what we heard this morning is still true, who is responsible at the local level and private as well as public sector? What kind of forces perpetuate this human tragedy, and what steps must be taken to move decisively to overcome these insults to mankind?

I am pleased to announce that the president of the Coca Cola Co., James Paul Austin, wired me that he will be glad to testify before our committee. He says he shares our concern about the critical problems of migrant labor and he welcomes this opportunity to describe the program of the Coca Cola Co. in dealing with this problem.

We hope to hear from Mr. Austin later this week. I think it depends upon the hearing scheduled before the full committee, but I will talk to Senator Yarborough about that later.

We will also be hearing from Mr. Carr, who directed the NBC documentary.

I would like to insert in the record at this point material related to issues discussed at today's hearing.

(The material referred to follows:)

COLORADO **MIGRANT** COUNCIL
Colorado Council on Migrant and Seasonal Agricultural Workers and Families
Area Code 303
892-6911
665 GRANT
DENVER, COLORADO 80203

July 30, 1970

Honorable Walter F. Mondale
Subcommittee on Migratory Labor
Old Senate Building
Washington, D.C.

Dear Sir:

Enclosed please find a study which was conducted by the Colorado Migrant Council on the nurtitional status of migrant children. Perhaps this document will provide additional information which your committee might be able use in connection with your ongoing hearings.

If we can be of further assistance, please do not hesitate to call on us.

Sincerely,

Ralph Martinez /pw

Ralph D. Martinez
Deputy Director

pw
encl

NUTRITIONAL STATUS OF PRESCHOOL MEXICAN - AMERICAN MIGRANT FARM CHILDREN

H. Peter Chase, M.D.
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Chief of Chemistry Division
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Robert M. Hunter, Ph.D.
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University of Colorado

Vaughn Spalding, R.N.
Director of Migrant Health Services
Colorado Migrant Council

This work was supported by Grant # CG 8074 Emergency Food and Medical Services, Title II D, Economic Opportunity Act

ABSTRACT

The nutritional and medical problems of 300 Mexican-American preschool children of migrant workers were evaluated in the spring of 1969 in Colorado. Outstanding in the history was the high infant mortality of 63 per 1000 live births. Frequent findings on physical examination included: low height attainment, upper respiratory infections, skin infections, dental caries, enlarged livers, hypertrophied tongue papillae, and conjunctival folliculitis. Biochemical testing showed low vitamin A levels in 159 children, low alkaline phosphatase in 120 children, and low total serum proteins in 28 children. Possible methods for improving the nutrition and health of the migrant children are discussed.

Migrant farm labor is presently used in probably every state of the United States. The total number of migrant farm workers is difficult to estimate because of a lack of record keeping and the problem of definition as to who is a migrant form laborer. In Colorado, estimates have ranged from 25,000[1] to 100,000[2] workers depending in part on whether intrastate workers crossing county lines and residents living at home and working at seasonal farm labor are included with the interstate workers. Since discontinuing the usage of alien farm workers, in which male workers from outside of the United States were transported to the United States for farm labor, there has been an increase in family travel and the resulting problems. From the view of health care it should be noted that whereas the mean number of workers per family is 3.5, the mean number of traveling family members is 6.6. The extra family members are frequently children and infants who must travel with their parents and suffer the nutritional and health consequences of travel. Little information is presently available concerning the medical and nutritional problems of these people. An earlier study described biochemical alterations in negro migrant workers in New York state[3]. A recent nutritional survey in Texas[4] probably also includes evaluation of some preschool children of Mexican-American farm workers. The purpose of the present study was to evaluate the nutritional-medical problems of the preschool children of the Mexican-American farm laborers.

METHODS

Three hundred Mexican-American children, age six years or below, were studied in May and June, 1969. Children were studied in two locations each in northeastern and southeastern Colorado. They came to the clinics voluntarily as a result of local publicity, were brought by volunteers, or were seen at one location in southeastern Colorado on the first day of a Head Start-Infant Education School program. The evaluation included medical histories, physical examinations, and blood biochemical determinations. Heights and weights were evaluated by means of the Boston Iowa Growth Grids, and head circumference on an international grid.[5] Interviews concerning food purchasing habits and cooking equipment available to the family were conducted by a nutritionist (J.M.D.). Weekly family shopping lists were computed for approximately forty families. All laboratory tests were done on venous blood samples drawn after overnight fasting, or in a few cases, four hours after a meal. Vitamins A and C, and serum and RBC folacins were determined at Fitzsimmons General Hospital, Denver, Colorado, by methods used in the National Nutrition Survey.[6] Other biochemical determinations were done in the Colorado General Hospital Pediatric Microchemistry Laboratory.[7]

Data was analyzed (under the direction of R.S.B.) by computerized statistical methods applied to four areas of the study: sociologic data, medical history, physical examination, and laboratory tests. Two broad types of analyses were undertaken: descriptive, for summarizing the characteristics of the sample, and inferential, for finding significant relationships among these characteristics. The descriptive analysis consisted primarily of frequency distributions, comparisons with "normal" values, and determination of means and standard deviations when applicable. The inferential analyses were directed toward relating the laboratory measurements to the other data. The method used was one-way analysis of variance, with items from the sociologic data, the medical history, and the physical examination as independent variables, and laboratory measurements as dependent variables. Analyses of variances determined whether different sub-samples of subjects differed significantly with regard to their average laboratory measurements.

RESULTS

Sociologic Data

Sociologic data is available on 151 of the Mexican-American migrant families studied in May and June, 1969. One hundred and sixteen of the families gave their home base as Texas, 26 were intrastate migrants from Colorado, and the remaining families were from miscellaneous other states. All fathers were farm laborers, working a mean of 6.3 months per year in agruculture and 1.8 months per year in other occupations. Mean educational attainment for the fathers was sixth grade and for the mothers, fifth grade. The mean annual family income was $1,885, with 61% of the families having an income less than $2,500 per year and 84% with an annual income under $3,500. Twelve families (7.9%) received financial welfare assistance in some form during the previous year. In 57% of the families only Spanish was spoken; in 36% of the families, both Spanish and English were spoken by at least one of the parents; and in

7% of the families only English was spoken. These sociologic findings do not differ from those gathered on a sample of 3500 Mexican-American migrant families by the Colorado Migrant Council between 1966 and 1969. This would suggest that our sample is representative of the Colorado Migrant agricultural population.

Medical History

The mean number of pregnancies per mother was 5.7, with 29 of the 142 mothers having had more than ten pregnancies. Sixty-five of the 825 pregnancies resulted in miscarriages or still births, for a fetal wastage of 79/1000 pregnancies. Forty eight of the 760 liveborn children died within the first year of life, for an infant mortality of 63/1000 infants. Mean family size at the time of the study was 4.6 children per family.

The 300 children were equally divided between males and females in all age groups: 45 children were under one year of age, 31 were between ages one and two, 41 between two and three, 66 between three and four, 59 between four and five, and 58 were between the ages of five and six years. One third of the mothers received no prenatal care or nutritional supplements prior to delivery. Two hundred and thirty one of the 300 children were born either in the hospital or an out-patient medical clinic. Mean birth weight was 3.2 kg., with 27 children weighing less than 2500 gm at birth. One third of the mothers initiated breast feeding, and 25% were still breast feeding when the child was two months old. Supplementary vitamins were received by 10% of the children in the first six months of life. One half of the children had received no DPT or polio immunizations. Twenty-four mothers gave a history of recurrent diarrhea (more than one episode in the previous year) in their children. Ten percent of the children had never been examined by a physician while 86% of the children two years of age or older had never been seen by a dentist.

Food Purchasing Habits and Dietary Adequacy

Thirty-five families reported spending $20-$30 per week on food with five reporting higher expenditures up to $60. When the shopping lists were priced at the local markets the families were found to have consistently over-estimated the cost of their shopping lists by five to fifteen dollars. The basic weekly food supply for migrant families is reported in Table I. There was little variation between type and quantity of food purchased regardless of family size. However, there is no way to determine individual intake from this data. From these shopping lists, which were descriptive of the family food habits, it is estimated that protein intake is adequate (vegetable proteins from beans and some animal proteins from eggs and milk). Thiamine, riboflavin, and niacin intake should be adequate also (cereals, enriched flour, and its products). Calcium and vitamin D intake are minimal to low as seen by the low consumption of milk. Iron, too, is minimal to low as a result of the insufficient intake of iron-rich foods. Vitamin A intake is almost negligable, although vitamin C intake should be adequate. When milk was available in the homes, the infants under two years of age would receive first priority with the next oldest having next priority. All of the families reported purchasing at least one third of the foods listed in Column 2, Table I in addition to the standard food supply when adequate money was available. When the additional money was available for food, the mothers reported they purchased more meat, milk, fruit,(apples, bananas, oranges), and vegetables (tomatoes, lettuce) in that order. If less money was available, these foods would be cut out in the reverse order. Candy, flavored beverages, cookies, and sweet rolls were purchased in the same amounts regardless of the money available unless the income was drastically reduced, in which case the sweet foods were eliminated from the diet.

The cooking equipment available in the homes was limited as the families carry very little with them during migration. Each baby in a family has one bottle. The family has two or three pots for cooking beans, one dish meals, or for frying; and a griddle for making tortillas on gas stoves. There is always a stove in the house with one half of these being wood stoves. Less than one-eighth of the families had running water. Pumps in the yards were the usual means of securing water.

Physical Examination Data on the 300 Children

Fifty-four of the 300 children were less than the third percentile for height, 17 were less than the third percentile for weight, and 17 less than the third percentile for head circumference. Hair dyspigmentation was noted in 21 children. Skin findings were prominent with hyperkeratosis in 19 and skin infections in 32 children. Angular lip lesions were present in ten of the children. Eye findings were also prominent, with increased corneal vascularization in 23, dry wrinkled conjunctivae in 56, and folliculitis suggestive of trachoma in 29 children. Mucoid or purulent nasal discharge was present in 69 of the 300 children (23%). Hypertrophic tongue papillae were present in 69 (Figure 1) and atrophic tongue papillae in 36 children. Large tonsils were noted in 67 and large cervical lymph nodes in 36 children. Thirty-nine percent of all children and 58% of the children over four years of age had dental caries, with a mean of four caries per child. Upper limb muscle mass was decreased in 31 and lower limb muscle mass in 28 children. Epiphyseal wrist swelling was present in 28 children and prominent rib beading in 22 children. Livers were palpable more than two centimeters below the costal margin in the right mid nipple line in 49 of the 300 children. Skin fold measurements are shown in Table II.

Laboratory Tests

Hemoglobin and hematocrit values are compared to normal values for the state of Colorado[8] as all children had been in the state at least two weeks. These normal values are similar to those obtained in a nutritional survey of 5000 preschool children in the United States.[9] Forty-seven children had hemoglobins below the tenth percentile for age, and forty-one children had hematocrits below the tenth percentile for age (Figure 2).

Levels of serum and RBC folacin, vitamin A, and vitamin C are shown in Table III. Twenty nine children were below normal in serum folacin levels, and three children were below in RBC folacin levels. One hundred and fifty-nine children (55%) were below normal in serum vitamin A levels. Two children were low in vitamin C levels.

Laboratory results other than vitamin levels are shown in Table IV. Serum alkaline phosphatase levels were low in 120 children, blood urea nitrogens were low in 49 children, and amylase activity was reduced in 16 children. Total serum proteins were low in 28 children and serum albumin in 73 children. Serum carotene was low in 219 children. Cholesterol levels were low in 44 children and high in 28 children.

STATISTICAL CORRELATIONS

Historical-Biochemical Correlations

Children whose parents spent part of the year employed in a trade outside of farm labor had higher mean total protein values (7.2 gm%) than children whose parents worked only in farm labor throughout the year (6.6 gm%; $p < .01$). The language spoken by the parents also correlated with mean laboratory values. Children whose parents spoke only Spanish had lower total serum proteins and albumin ($p < .01$) levels than children of parents who spoke English(with or without Spanish in addition). Although not statistically significant, cholesterol and alkaline phosphatase levels also tended to be lower in children whose parents spoke only Spanish. There were no significant differences in laboratory tests done on children of the 26 families from the state of Colorado (intrastate migrants) compared to the children of interstate farm workers.

Mean vitamin levels tended to be lower in children who had weighed under 2500 gm at birth (Table V). The mean laboratory values were also significantly influenced by the total number of children in the families. Thus mean vitamin A and C levels were higher in families with fewer children, as were alkaline phosphatase and BUN values. Gamma globulins, likely an indication of the numbers of infections, were higher in families with larger numbers of children.

When vitamins were given to the mother during pregnancy or to the child in the first six months of life, the vitamin A and C levels were higher in the child (Table V). This was true for children under one year of age but was also true for the older children. Serum folacin levels were significantly higher ($p < .01$) in the children under one year of age whose mothers had received vitamins, but did not remain higher in older children. RBC folacins were also higher in children under one year of age whose mothers received vitamins or when vitamin supplements were given to the children, although the differences were not statistically significant. When vitamin C levels were analyzed on all of the children, the levels of the low birth weight children were inexplicably higher than those in the children of higher birth weight. Vitamin levels and other lab tests did not differ significantly between bottle fed and breast fed infants under one year of age. A history of greater incidence of having had measles was found for children with low vitamin A levels (36 of 126) than in children with normal vitamin A levels (18 of 120).

Physical Examination - Biochemical Correlations

In the physical examination, low vitamin A levels correlated statistically ($p < .05$) with a greater incidence of : 1) skin infections, 2) reduced upper and lower extremity muscle mass, 3) nasal discharge, and 4) hypertrophied or atrophied tongue papillae compared to children with normal vitamin A levels. There was no correlation between low vitamin A levels and corneal dryness, hypervascularity, dyspigmentation, or wrinkling on the physical examination. Skin fold thicknesses tended to be lower for children with low vitamin A levels than for children with normal levels. The mean lateral thoracic, subscapular, and triceps skinfolds measured 5.1, 5.5, and 7.8 respectively for children with low vitamin A levels, compared to 5.7, 6.1, and 8.3 respectively for children with normal vitamin A levels.

Mean laboratory values were determined for the presence or absence of each of the physical examination findings. Table VI shows the mean laboratory values in children with or without various abnormalities on the physical examination. When a trend appeared, values are included even though statistical analysis did not prove a difference. Vitamin A values were significantly lower ($p < .05$) in children with hair dyspigmentation, skin infections, and abnormal tongue papillae. Serum folacins and gamma globulin levels were both significantly lower ($p < .01$) in children with large livers. Mean vitamin C and alkaline phosphatase values were significantly lower in children with low height.

DISCUSSION

The general lack of medical care prior to and following delivery is reflected in the high mortality rate in the first year of life. In this study, the Mexican-American migrant infant mortality was found to be 63 per 1000 live births. The 1968 infant mortality for low income areas served by the Neighborhood Health Centers and the City Hospital in Denver was 23.4 per 1000 live births.[10] This was greatly reduced from the 1964 Denver figure of 33.1 per 1000 live births taken prior to the onset of the neighborhood health program in 1965. The migrant neonatal mortality figure of 63 deaths per 1000 live births is comparable to a similar figure for the overall United States in the year 1930. The high infant mortality may, in part, be due to the lack of of hospital delivery of newborn infants, most of whom would be considered "high risk" because of the lack of prenatal care, the poor housing and sanitation, inadequate nutrition, and the need to travel with a small infant. It is conceivable that rural neighborhood health programs, as recently proposed for migrant health care, could greatly reduce the neonatal mortality in this population. A program for hospital care will also be necessary, however. Migrant families do not qualify for Medicaid benefits in most states because they must first qualify for some program of categorical assistance. These commonly include Aid to Dependent Children and programs to assist the blind, disabled, and aged. Rarely do migrating Mexican-American families lack a father, and he is usually employed. Few, if any, migrants are blind, disabled, or aged. Thus, while residency has been eliminated as a requirement for Medicaid, it has been of little use to the migrant.

The incidence of low serum vitamin A levels in these United States children was higher than that found in ten of eleven underdeveloped countries in the Far East, Central America, and South America studied over the past ten years.[11] This high incidence of vitamin A deficiency was anticipated from the lack of foods containing vitamin A in the basic food list reported in Table I. Egg yolks are the main, and frequently the only, source of vitamin A. Some families pick carrots in Texas for approximately two weeks in March and bring these home for meals or for trade with other families. However, the use of mechanical harvesters of carrots and of Mexican National farm workers on a daily basis have decreased the amount available for consumption by families or farm workers in Texas. It is also true that carrots are not a popular food in the diet of the Mexican-American culture, and nutrition-education programs may be one way of approaching the deficiencies.

With one third of the mothers receiving no prenatal care or nutritional supplementation and a much higher percentage receiving inadequate nutritional care, it is likely that vitamin A deficiency is present from birth in many of the infants. Mothers of deficient infants had a greater number of pregnancies than mothers of children with normal vitamin A levels. It is likely that the greater number of pregnancies,with greater maternal depletion of vitamin levels, as well as the larger number of siblings to divide the food amongst,were both important factors in the lower vitamin levels of these children. Low vitamin A values were more apt to be found in infants whose mothers did not receive nutritional supplements during pregnancy. Improved prenatal care would help the nutritional status of the offspring and would probably reduce the infant mortality.

The low vitamin A levels correlated statistically with an increased incidence of skin infections and upper respiratory tract infections on physical examination. Changes in the tongue papillae appeared to be a reliable physical sign of low serum vitamin A levels in this group (Figure 1) whereas dryness and wrinkling of the cornea and increased corneal vascularization did not show any statistical correlation. Dark adaption was not evaluated, but is known to be associated with vitamin A deficiency. Xerophthalmia was not detected in any of these children. An increased incidence of measles was found in the medical history amongst children with low vitamin A levels suggesting that improvement of nutritional status may reduce the incidence of measles. In undernourished populations, measles is known to be associated with a high mortality rate. The elevated gamma globulin levels in children with low vitamin A levels likely reflect the increased number of infections. Improvement of nutritional status would likely improve both the morbidity for infections and the mortality rate in these children. The time necessary to improve serum vitamin A levels is apparently quite long. We restudied nineteen children with low vitamin A levels after a minimum of 28 days in Infant Education - Head Start over a six week period. They received two meals and two snacks per day in the school and oral vitamin drops from the school nurse. In spite of this supplementation, serum levels were still low upon re-evaluation. It is known that liver stores must be replenished first in vitamin A deficiency, and it is likely that this is what was happening in these children. It was not appropriate to obtain liver biopsies to more accurately assess the degree of vitamin A deficiency.

The majority of the families had come recently from Texas where fresh grapefruit and oranges had been readily available. It was therefore not surprising that vitamin C levels were quite normal. Potatoes are also a staple of the diet and, when eaten in large quantities, can meet vitamin C requirements. It was of interest, however, that vitamin C values tended to be lower in children with low vitamin A levels, and that vitamin C levels were significatly lower in the 59 children with low height. It is possible that the physical examination findings of the rib beading and epiphyseal swelling were related to vitamin D deficiency at another time in the year. Very few high alkaline phosphatase values were found, suggesting that active rickets was not the cause of these findings. It was striking that the children with physical signs of vitamin D deficiency were the same children who gave a history of not liking milk. This was a similar finding in other children showing clinical signs of poor nutritional status, in that they frequently disliked one of the staples in the families' diets. Because of economic limitations, the families were not able to make alterations in the food regularly purchased to meet idiosyncracies of one child's likes or dislikes. A greater number of children had lower serum folacins than RBC folacin levels. It is thought that the former represents recent intake, whereas the latter represents long term accumulation. This would suggest poorer nutritional intake while in the migrant stream than when at home. However, the serum and RBC folacins correlated significantly ($p < .01$) in all age groups. This is suggestive that current normal values for one of these tests may be inaccurate.

In the present study, children tended to have adequate subcutaneous fat, but to have a frequent incidence of low height attainment. When Mexican children come from upper economic class families in Mexico City, height attainment is similar to the Iowa Growth Grids used in this study.[12] It appears likely that the low height attainment in our children was the result of generalized undernutrition, including protein and vitamins, rather than being on a genetic basis. The decreased stature may also be related to poor prenatal nutrition. Using a recent classification of kwashiorkor[13], one of our children had serum proteins below 5.5 gm% and was below the third percentile for height, and would be classified as having kwashiorkor. At least two additional children would have been classified as having generalized caloric deficiency or marasmus.

Cholesterol levels were above normal in 28 of the 300 children (9.3%). This may be related to the common use of animal fats in cooking. As it is the current belief that cholesterol deposits start in childhood, it is possible that this malnutrition is as dangerous as some of the deficiencies. Information concerning the mean age and the incidence of coronary artery disease would be of interest in the adult Mexican-American population.

Folliculitis suggestive of trachoma was an unexpected finding in ten percent of these children. The presence of trachoma was verified by Giemsa and fluorescent antibody staining, and is being described in detail in a separate report. Trachoma is usually not a serious disease in children, although some children did show evidence of secondary infections. Trachoma is a major cause of blindness in underdeveloped countries, and one father was coincidentally seen who was apparently losing his vision from complications of trachoma. Four of his five children were also infected.

There did not appear to be a single laboratory test that best reflected nutritional status in these children. Low alkaline phosphatase values were found in 120 of the 300 children, and correlated statistically with low height attainment. Because of the lack of normal values for laboratory tests in children of different ages and cultures, it was important to compare mean laboratory values for children with and without abnormal physical examination findings (Table VI). Determining the mean and range of values for children without abnormal physical findings might be a better way to determine the normal values for a group than is the present method of doing two standard deviations for the mean value of a population studied. Unfortunately, multiple laboratory findings had a tendency to be lower (Table VI) in the presence of abnormal physical exam findings, and it is often difficult to associate an abnormal finding with any specific laboratory test.

The children's mean serum protein levels were significantly higher when the fathers had additional employment outside of summer farm labor. The children's mean serum proteins were also significantly lower when the parents did not speak English. The ability to speak and read the English language allows the migrant people to communicate with employers, to read labels on commodity foods, to communicate with health and social personnel who might be able to help them to learn about community benefits available, and to help their children with the language that must be spoken in the schools. As 57% of the parents do not speak English, adult education classes for teaching English would be a way in which these families might be helped.

The mean income of the migrant families in this study was $1885.00 per year, with 60% earning less than $2500.00 per year. Yet only twelve families reported having received welfare assistance in the previous year. Money is not available for adequate health care or nutrition. Travel is necessary for migrant farm workers in order to find work, and is an additional expense to the family. Travel perpetuates low educational attainment, as children are removed from schools and return late. It is not unusual for home base schools to penalize the children for their absence by reduction in grades, regardless of the ability of the children. A positive aspect of present migrant programs is the attempt being made to furnish summer schools in the areas of travel for the migrant children.

Winter employment in Texas is often difficult to find. Agriculture is the major industry in southern Texas, where many of the Colorado migrants come from, and inexpensive farm labor can still be hired on a daily basis from Mexico. The Mexican National who enters the United States illegally for long term work is also still a problem in Colorado. They keep the pay low and take jobs from the United States residents. The illegal entrants are unable to complain to authorities when someone decides not to pay them, or when they are given substandard housing as they know they would then be caught and returned to Mexico. At present there is no penalty for farmers hiring illegitimate labor and this might be considered.

At present many existing programs are unable to be utilized by the migrant population. Inclusion of the migrant population in the medicare-medicaid hospitalization programs without first meeting each county's welfare certification practices would be of great benefit. Migrants do not presently qualify for food stamps while traveling because of unequal earnings throughout the year. Recommendations made at the White House Conference on Nutrition for food stamp certification once yearly and applicable from state to state would be helpful but this has not yet been acted upon. Commodity foods have been of little help because of limited items and pride, with a frequent history given for having been told "you are strong and able to work, so don't come back here again." An additional problem concerning commodity foods is the storage of approximately thirty pounds of food per person (frequently distributed on a monthly basis) in a one or two room dwelling. Lack of room, refrigeration, and protection from rodents and insects would probably interfere with utilization of commodity foods if they were readily available.

A possible solution to the problem of communication between migrants and existing health and welfare facilities is the introduction of migrant health aids into the migrant stream as is currently being tried on an experimental basis by the Colorado Migrant Council. With the alteration of existing program policies to accommodate migrants, and the use of health aids to make the programs known to the people, the health and nutritional status of the migrants could greatly improve. Long term objectives of finding suitable jobs and living conditions outside of the migrant stream will be necessary. Adequate nutrition, health care, education, and housing should receive high priority in the present needs of the migrant farm worker and his family.

TABLE I

PRIMARY FOODS IN THE COLORADO MIGRANT FARM WORKERS' DIET

BASIC FOOD ITEMS	ADDITIONAL FOODS	LESSER USED ADDITIONAL FOODS
Potatoes	Chuck roast	Pork roast
Eggs	Ribs	Pork chops
Wheat Flour	Cabbage	Variety meats
Hamburger	Carrots	Cookies
Chicken	Canned corn	Oatmeal
Dry cereal	Bananas - in season	Saltine Crackers
Pinto beans	Apples - in season	Bread
Rice	Oranges - in season	Ice cream
Macaroni	Milk	Sugar
Lettuce	Bottled soft drinks	Candy (Hard)
Tomatoes	Canned Chili (no meat)	Potato chips
Lard	Canned spaghetti	Corn Chips
Kool-Aid	Sweet bread (rolls)	Apple juice
	Corn flour	Pineapple juice
		Orange juice

TABLE II

SUBCUTANEOUS SKIN FOLD MEASUREMENTS*

	<7.5 mm	<5 mm	<3 mm
Lateral thoracic	238	139	11
Subscapular	235	99	2
Triceps	126	15	0

* Values represent the number of children falling into each group as measured with standard techniques[14] using the Lange Skin Fold Calipers.[15]

TABLE III

VITAMIN LEVELS *

	Less Than Acceptable		Acceptable
	Deficient	Low	
Serum folacin (ng/ml)	4 (< 3)	25 (3.0-5.9)	264 (≥ 6.0)
RBC folacin (ng/ml)	2(< 140)	1(140-159)	285 (≥ 160)
Vitamin A (μg/100 ml)	9 (< 10)	150+ (10.0-29.9)	129 (≥ 30 or > 20 if < 6 mos old)
Vitamin C (mg/100 ml)	0 (< 0.1)	2 (0.1 - 0.19)	280 (≥ 0.2)

* Values represent the number of children in each category with the laboratory values shown in parentheses being of the National Nutrition Survey.[6]

+ Age corrections are included, so that children under 6 months of age are not included unless the value was less than 20 μg/100 ml.

TABLE IV
LABORATORY RESULTS FROM THE PRESCHOOL CHILDREN OF MIGRANT WORKERS

	LOW	NORMAL	HIGH
Alkaline Phosphatase (International Units)	120 (< 50)	171(50–150)	4(> 150)
Blood Urea Nitrogen (mg/100 ml)	49 (< 10 from 2-6 yrs) (< 5 from 0-2 yrs)	240 (10-20 from 2-6 yrs) (5-15 from 0-2 yrs)	2(>20)
Cholesterol (mg/100ml)	44(< 140 if > 1 yr) (< 70 if < 1 yr)	216(140-240 from 1-6 yrs) (70-170 if < 1 yr)	28(> 240 if 1-6 yrs) (>170 if >1 yr)
Amylase (Close-Street Units/100 ml)	16 (< 6)	264 (6-33)	1(>33)
Total Serum Proteins (gm/100 ml)	28(< 5.0 if < 6 mos) (< 5.5 from 6 mo-1 yr) (< 6.0 if > 1 yr)	251(5.0-8 if < 6 mos) (5.5-8 if 6 mo-1 yr) (6-8 if > 1 yr)	5 (> 8)
Serum Albumin (gm/100ml)	73(< 3.5 if < 1 yr) (< 3.8 if > 1 yr)	208(3.5-5.5 if < 1 yr) (3.8-5.5 if > 1yr)	1 (> 5.5)
Serum Globulins (gm/100 ml)	α_1 26 (< 0.15)	245(0.15-0.44)	10 (> 0.45)
	α_2 1(< 0.34)	266(0.35-0.94)	4 (> 0.94)
	β 17(< 0.44)	260 (0.45-0.94)	4(>0.94)
	6 (< 0.44)	216 (0.45-1.2)	60 (> 1.2)
Serum Carotene (μg/100 ml)	219(< 100)	46 (100-150)	9(> 150)

Values represent the number of children below, within, or above two standard deviations of normal.[7] Normal values or their limits are included in parentheses.

TABLE V

MEAN LABORATORY VALUES CORRELATED WITH MEDICAL HISTORIES +

1) Birth Weight	<2500 gms.		2500-3500 gms.
Serum Folacin:			
Children < 1 yr old	6.7		8.3
All Children	8.8		10.2
RBC Folacin:			
Children < 1 yr old	292		364
All Children	362		406
Vitamin C:			
Children < 1 yr old	.73		1.14
All Children	1.07		.82
Gamma Globulin:			
Children < 1 yr old	.45		.9*
All Children	.91		1.03*
Amylase:			
Children < 1 yr old	6.0		11.2
All Children	11.7		13.7
2) Number of Living Children	1 or 2	3 to 9	9 to 20
Vitamin A	32**	28	26
Vitamin C	.92	.81	.74
Alkaline Phosphatase	58**	50	52
Gamma Globulin	.83**	1.06	1.06
BUN	13.7	12.1	11.1**
3. History of Measles	Yes		No
Vitamin A	26		30*

4) Nutritional Supplements During Pregnancy	Yes	No
Vitamin A:		
Children < 1yr old	36	30
All Children	30	26**
Vitamin C:		
Children < 1 yr old	1.0	0.62
All Children	.88	.68**
Serum Folacin:		
Children < 1 yr old	8.92	6.66*
All Children	10.12	10.11
RBC Folacin:		
Children < 1 yr old	367	358
All Children	397	393
5) Nutritional Supplements to Child in first 6 months	Yes	No
Vitamin A:		
Children < 1 yr old	39	32
All Children	31	28
Vitamin C:		
Children < 1 yr old	.92	.86
All Children	.87	.75**
Serum Folacin:		
Children < 1 yr old	8.88	8.09
All Children	10.2	10.2
RBC Folacin:		
Children < 1 yr old	436	328
All Children	405	379

+ The figures in this table represent the mean laboratory values for each of the given categories. For the category "Number of Living Children", the asterik is placed by the value which is significantly different from the other two values.

* $p < .05$

** $p < .01$

TABLE VI

MEAN LABORATORY VALUES CORRELATED WITH PHYSICAL EXAM FINDINGS +

	Absent	Present
1) Hair Dyspigmentation		
Hemoglobin	12.7	11.6
Serum Folacin	10.6	9.6
RBC Folacin	40.7	33.5
Vitamin A	28.9	18.0*
Vitamin C	0.85	0.58
Alkaline Phosphate	57.6	47.2
Cholesterol	167	157
Carotene	69.7	46.8**
Tyrosine	4.9	2.9
2) Skin Infection		
Vitamin A	29.1	25.3*
Vitamin C	0.86	0.79
Tyrosine	6.6	4.6
3) Reduced Muscle Mass (lower limb)		
Serum Folacin	11.7	10.4
Vitamin C	0.85	0.77
Phenylalanine	3.3	2.9*
Tyrosine	4.9	3.9
Alkaline phosphatase	55.2	73.0*
4) Enlarged Liver		
Serum Folacin	10.8	9.1*
RBC Folacin	407	391
Vitamin A	28.9	26.8
Vitamin C	0.85	0.80
Gamma Globulin,	1.04	0.92*

		Absent	Present
5) Lip Lesions			
Serum Folacin		10.6	9.1*
Vitamin C		407	391
Albumen		4.06	3.74*
Phenylalanine		4.8	3.6
6) Abnormal Tongue Papillae			
Vitamin A		29.3	25.5*
Gamma Globulin		0.99	1.11*
Tyrosine		4.95	3.55
7) Height	< 3rd%	3-50%	> 50%
Serum Folacin	9.8	10.1	10.7
RBC Folacin	385	399	414
Vitamin C	0.70	0.83	0.94*
Alkaline Phosphatase	53.2	52.0	69.8**
8) Weight			
Hematocrit	38.7	37.9	37.4
RBC Folacin	383	394	411
Vitamin A	31.4	29.4	27.8
Vitamin C	0.73	0.83	0.84
Albumen	4.16	4.13	3.96*
βGlobulin	0.57*	0.62	0.65
Amylase	10.7*	14.1	13.2
9) Head Circumference			
Vitamin C	0.76	0.85	0.83
Alkaline Phosphatase	55.2	53.6	67.4*
Tyrosine	3.8	5.0	5.0

+ The number of children with each of the positive findings is given under "Physical Examination" in Results. The figures of 1-6 represent the mean laboratory values for children with or without the abnormal findings. For height, weight, and head circumference, the figures represent the mean laboratory values for the children in different percentiles of growth; the figure with the * is then significantly different from the other two figures at the levels of significance indicated.

* $P < .05$
** $p < .01$

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Appreciation is expressed to Mrs. Carol Dabiere, Mrs. Josie Fetters, and Miss Noreen Welch for their assistance in obtaining laboratory values, to Mrs. Yaye Herman, Mr. Wayne Good, and Dr. Nicholas Raica of Fitzsimons Nutrition Laboratories for analyses of Folic Acid, Vitamin C levels, and Vitamin A levels respectively.

Correlations Between Biochemical Tests

Laboratory values were correlated with each other by age groups; group I, 1-11 months; group II, 12-23 months; group III, 24-35 months; group IV, 36-47 months, and group V, 48 months and above (only values of statistical significance of $p < .05$ are reported). Hemoglobin correlated with hematocrits in all age groups ($p < .01$) and with cholesterol levels in groups I, III, and V. Carotenes were lower in children with lower hemoglobins in groups III and V. Serum folacins correlated significantly ($p < .01$) with RBC folacins in all age groups. Vitamin A levels correlated significantly ($p < .02$ or less) with Vitamin C levels in four of the five age groups; I, II, III, and V. Gamma globulin levels correlated negatively with the vitamin A levels (i.e., higher levels of gamma globulin in the presence of lower vitamin A levels). Low phenylalanine levels correlated positively with low tyrosine and low BUN levels in group I, low BUN levels in group III, and low tyrosine levels in group V. Total serum proteins correlated with all of the protein components except α_1 proteins for all of the age groups. Total proteins correlated with serum cholesterol levels in groups I, II, and IV. Children with low serum proteins had a mean phenylalanine-tyrosine ratio of .83, and children with normal serum proteins were found to have a ratio of 1.24 ($p < .01$). Amylase and cholesterol values correlated with each other in groups I and IV.

DEFICIENCIES OF PRESENT FOOD STAMP PLAN FOR MIGRANTS, PREPARED FOR IOWA STATE DEPARTMENT OF SOCIAL SERVICES, MAURICE HARMON, COMMISSIONER, APRIL 24, 1969

WAGES AND INCOME

In 1967 the average annual wage for migratory workers who did farm and nonfarm work was $2149, and the average number of days worked was 168. When working, the average daily wage was $12.80. (Table I) From our own census of migrants in Iowa and southern Minnesota, these appear to be accurate figures. Average annual income was approximately $2000 to $2500 for a family of six.

This data points out two basic problems encountered by migrant workers. First, they are unemployed during several months of the year while traveling to new field locations or searching for work, particularly during the winter months. Welfare assistance is not available when unemployed because of State residency requirements. Secondly, even when employed in the fields during the summer, wages are low and income extremely variable. Rain may prevent work for a week at a time. Full-time employment may not be available. Additionally, there are a number of expenses incurred by migrants when they come to the area including the cost of transportation, advances for the first few weeks, and the like. Thus, even when work is available, the individual or family is normally in debt and has difficulty maintaining a budget.

FOOD EXPENDITURES AND NUTRITIONAL REQUIREMENTS

Given the low average family income and the variable nature of income throughout the year, migrant families are in clear need of food assistance if their children are to maintain an adequate diet.

The U.S. Department of Agriculture has computed the nutritional needs of families based on the age and sex of family members, and the expenditures required to fulfill these needs. Table II presents cost estimates for a "basic low-cost diet," with the figures adjusted by the Consumer Price Index. Based upon this table it would take approximately $159.04 per month to feed a family of six when the age and sex of family members are as shown in the table. The average daily cost per person amounts to $.95. If the children are somewhat younger, the monthly cost is reduced appropriately, and if the family size falls below six, then ten percent is added to the figures.

In 1963 the USDA also prepared an economy food plan" which, using the same family, would bring the monthly food cost down to $129.00 or an average daily cost of $.72 per person.

FOOD STAMPS AND NUTRITIONAL NEEDS

Based upon the average daily wages reported in Table I, the average monthly income for a migrant family of six would be approximately $384.00. Under the food stamp program for Iowa, the family would make a monthly payment of $104.00 and receive a $32.00 bonus for a total of $136.00. This total is less than that required for the basic low-cost food plan computed by the USDA. An additional expenditure of $23.00 would be necessary to reach this level.

The total expenditure for stamps plus the bonus does surpass the total recommended in the "economy food plan" by $7.00. Yet the USDA points out that the use of these food plans requires a high degree of skill in food preparation as well as a keen economic sense. The problem is compounded for migrant families since (1) most of the income is received during the summer and is extremely variable from week to week making budgeting difficult and (2) migrants are exempted from welfare programs when unemployed because of local residency requirements.

FOOD EXPENDITURES AS A PERCENTAGE OF INCOME

A further problem of the food stamp program is the large percentage of a family's income which must be diverted to food expenditures because of the low bonus payments and the high payments required before receiving a bonus. Again, if the family earns $384.00 per month, $104.00 must be spent on food to receive the $32.00 bonus. This amounts to an outlay of 27% of family monthly income, and this still does not reach the level of the "basic low-cost plan." With an additional outlay of $23.00, approximately 33% or one-third of family monthly income is diverted for food expenditures.

Even more important, as monthly income declines, a proportionately greater expenditure is required for food. If the monthly income for a family of six is $160.00, the family will spend $68.00 for a food stamp bonus of $40.00. This requires an outlay of 38% of monthly family income. If an additional $21.00 is spent to bring food expenditures up to the standards of the "basic low-cost plan" an outlay of nearly 75% is required. Even to bring the diet up to the standards of the "economy plan," an outlay of nearly 56% is necessary. This stands in comparison with the average expenditure for food of 22% in 1968 for all consumers.

GOALS OF THE FOOD STAMP PROGRAM

All of these figures point out the fact that the food stamp program is not a welfare program. The purpose of the program in Iowa is "to increase the food purchasing power of low-income families and to increase the quantity and quality of foods consumed by these households thus providing for more adequate and nutritious diets to those who have heretofore had limited means for food purchases." For migrant families in particular it is clear that (1) purchase payments for stamps are too high and (2) stamp bonuses are too small. Many families cannot achieve an adequate diet even when they can afford to purchase food stamps.

EMERGENCY SITUATIONS

In using MEDI funds for the purchase of emergency food, a number of limitations in the food stamp program have been observed:

(1) Many families lack sufficient funds for even the minimal payments for food stamps. This is particularly true when families first come into the area and lack income. Often, work does not begin for several weeks and the first pay check is not received until after two weeks of work.

(2) When families first come, they may be receiving income but have incurred bills for transportation from Texas, advances for their families, and personal advances to pay for rent and the like during the first few weeks of work. Together, these costs normally total about $55.00, and the money is deducted directly from the migrant's pay check. These deductions are not counted in calculating income for the purchase of food stamps.

(3) For large families, as already noted, food stamps are not sufficient to help the family maintain an adequate diet. Thus, for a family of twelve with no income, a $3.00 purchase will give $103.00 in stamps. This must last the family for one month or a daily expenditure of $.29 per person.

(4) When migrant families settle out of the migrant stream, a number of additional expenses are incurred in the first weeks of settlement including deposits for rent and utilities in particular. Rarely are there savings to cover these costs and such expenditures are not taken into account in the issuance of food stamps.

(5) With the use of MEDI funds, the Migrant Action Program has sought to help migrant families purchase food stamps or commodities when such emergencies arise. To date, however, the funds used for these emergencies have been counted as income during the next purchase of food stamps. More aid could be provided if such emergency grants would be treated in the same manner as stipends from job-training programs.

(6) Because of lack of income and/or low-cost housing, many families who would ordinarily qualify for the food stamp program are forced to live with relatives or friends whose income may be marginal or above poverty guidelines, but who do not contribute to these families incomes. Since food stamp regulations require that the family maintain separate cooking facilities, the migrant families do not therefore qualify for the program.

(7) Since field labor requires that migrants work up to 10–11 hours per day during the peak season, they are often not able to even make application for food stamps during the hours or the days that the county offices are open. Most emergency situations occur nights, or weekends.*

(8) Many migrants arrive in this area via company busing, public transportation, etc., and do not therefore have transportation from camp to the Social Welfare county offices for purposes of applying for purposes of applying for food stamps.*

(9) Language barriers cause much confusion in the application and qualifying process. In most cases Migrant Action Program is forced to send a staff per-

son with the applicant in order that he may serve as interpretor to the Dept. of Social Welfare*

CONCLUSION

While Migrant Action Program does not have resource for in depth research, it is possible to point to indications in consideration of an annualized income plan for migrant workers vs. the actual income plan now being used in qualifying migrants for the food stamp program.

Using $2,000 as the average income for workers who do both farm and nonfarm work in Iowa with a family size of 6 members, the following would be true:

Under the annualized income plan a worker would be certified on the basis of $165 average monthly income. The plan would require a monthly expenditure of $68 resulting in a $40 bonus which would provide a total monthly budget for food of $108, ($18 per month per person or $.60 per day per person. Not enough to provide a basic low-cost diet.)

If however the income were earned over a 5-month period of full-time employment (a rarity if not an impossibility), the family would be able to purchase food stamps for a 30 day period for a cash outlay of $104 dollars resulting in a $32 dollar bonus making available a total monthly budget for food of $136. ($22.66 per person per month or $.75 per person per day. Still not enough to provide a basic low-cost budget diet.)

It should be noted however that by using the actual income plan, the migrant family during those months and periods of time when no income was being earned would be able to qualify for food stamps at minimum rates of $1.00 etc. It is equally obvious that it is essential that migrants have access to the food stamp program at all times. While still inadequate, actual income would be preferable to annualized income.

TABLE I.—EMPLOYMENT AND EARNINGS: NUMBER OF FARM WAGEWORKERS, AVERAGE NUMBER OF DAYS WORKED, AVERAGE ANNUAL AND DAILY EARNINGS, MIGRATORY STATUS, AND TYPE OF WORK, 1967

	Total workers	Average days worked in year	Average annual wage[1]	Average daily wage
Total migratory workers	276,000	85	$922	$10.85
Migratory workers who did farm but no nonfarm work	170,000	138	1,494	10.80
Migratory workers who did farm and nonfarm work	106,000	168	2,149	12.80

[1] These annual and daily earnings figures do not include the value of perquisites or fringe benefits furnished without charge by the employer. Actually, hired farmworkers generally receive less in the way of fringe benefits than do nonagricultural workers. A substantial proportion of farm wageworkers do receive some perquisites such as room and board, housing, meals, transportation, and the use of garden space. The value of these items, however, generally does not equal the value of health and medical insurance, paid vacations, and other fringe benefits received by industrial workers. Housing and sanitary facilities are frequently substandard and are a less substantial income supplement than is commonly supposed.

Source: U.S. Department of Agriculture, September 1968.

TABLE 2.—REQUIRED EXPENDITURES FOR LOW-COST FOOD PLAN ON MONTHLY BASIS, FOR A FAMILY OF 6, AUGUST 1968.[1]

Sex	Age group	Monthly expenditure[2]
Man	20–34	$30.36
Woman	20–34	23.08
Girl	13–15	27.36
Boy	13–15	29.92
Child	10–12	26.08
Child	7–9	22.24
Total		159.04
Average daily cost per person		.95

[1] All figures were adjusted by the consumer Price Index, U.S. Bureau of Labor Statistics.

[2] The average family size for migrant families in the area in 1968 was 6. 10 percent was deducted from the monthly food costs since the family size is 6. It should also be noted that monthly food costs declined somewhat as the age of children decreases.

Source: Consumer and Food Economics Research Division, ARS, U.S. Department of Agriculture, January 1963.

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*To alleviate these problems, MAP would be willing to act as a proxy to enable greater participation of migrants in the food stamp plan. This would be similar to the 'Multi-family' proxy presently recognized in some states. Payment would be made by MAP directly to the county either by check or voucher system.

IOWA FOOD STAMP PROGRAM—NET INCOME BASIS OF ISSUANCE

Monthly net income	Monthly			Semi-monthly		
	Purchase	Bonus	Total	Purchase	Bonus	Total
6-person household:						
$ 0 to $19.99	$3	$73	$76	$1.50	$36.50	$38
$20 to $29.99	6	70	76	3.00	35.00	38
$30 to $39.99	10	70	80	5.00	35.00	40
$40 to $49.99	16	64	80	8.00	32.00	40
$50 to $59.99	22	60	82	11.00	30.00	41
$60 to $69.99	28	56	84	14.00	28.00	42
$70 to $79.99	34	54	88	17.00	27.00	44
$80 to $89.99	40	52	92	20.00	26.00	46
$90 to $99.99	44	52	96	22.00	26.00	48
$100 to $109.99	48	50	98	24.00	25.00	49
$110 to $119.99	52	48	100	26.00	24.00	50
$120 to $129.99	56	46	102	28.00	23.00	51
$130 to $139.99	60	44	104	30.00	22.00	52
$140 to $159.99	64	42	106	32.00	21.00	53
$160 to $179.99	68	40	108	34.00	20.00	54
$180 to $199.99	72	38	110	36.00	19.00	55
$200 to $219.99	76	36	112	38.00	18.00	56
$220 to $239.99	80	34	114	40.00	17.00	57
$240 to $259.99	84	32	116	42.00	16.00	58
$260 to $279.99	88	32	120	44.00	16.00	60
$280 to $299.99	92	32	124	46.00	16.00	62
$300 to $ 29.99	96	32	128	48.00	16.00	64
$330 to $359.99	100	32	132	50.00	16.00	66
$360 to $389.99	104	32	136	52.00	16.00	68

TABLE 2.—ESTIMATED COST OF 1 WEEK'S FOOD,[1] JANUARY 1962—U.S.A. AVERAGE

Sex-age groups	Low-cost plan	Moderate-cost plan	Liberal plan
Families:			
Family of 2, 20 to 34 years[2]	$13.80	$18.80	$21.30
Family of 2, 55 to 74 years[2]	12.40	17.00	19.00
Family of 4, preschool children[3]	20.60	27.50	31.50
Family of 4, schoolchildren[4]	23.80	32.10	36.60
Individuals:[5]			
Children, 7 months to 1 year	3.10	3.90	4.20
1 to 3 years	3.70	4.70	5.30
4 to 6 years	4.40	5.70	6.80
7 to 9 years	5.20	6.80	7.80
10 to 12 years	6.10	8.20	9.40
Girls:			
13 to 15 years	6.40	8.70	10.00
16 to 19 years	6.50	8.70	9.90
Boys:			
13 to 15 years	7.00	9.60	10.90
16 to 19 years	8.20	11.20	12.60
Women, 20 to 34 years	5.40	7.50	8.50
35 to 54 years	5.30	7.30	8.30
55 to 74 years	5.00	6.90	7.80
75 years and over	4.80	6.40	7.30
Pregnant	6.80	8.80	9.80
Nursing	8.50	10.90	12.10
Men, 20 to 34 years	7.10	9.60	10.90
35 to 54 years	6.60	9.00	10.10
55 to 74 years	6.30	8.60	9.50
75 years and over	6.10	8.20	9.10

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[1] These estimates were computed from quantities in food plans published in the October 1957 issue of Family Economics Review. Quantities for children were revised January 1959 to comply with the 1958 NRC Recommended Dietary Allowances. The cost of the food plans was first estimated by using the average price per pound of each food group paid by nonfarm survey families at three selected income levels in 1955. These prices were adjusted to current levels by use of Average Retail Prices of Food in 46 Large Cities Combined, released periodically by the Bureau of Labor Statistics.

[2] 10 percent added for family size adjustment. For derivation of factor for adjustment, see September 1960 issue of Family Economics Review.

[3] Man and women 20 to 34 years; children, 1 to 3 and 4 to 6 years.

[4] Man and women 20 to 34 years; children, 7 to 9 and 10 to 12 years.

[5] The costs given are for individuals in 4-person families. For individuals in other size families, the following adjustments are suggested: 1-person—add 20 percent; 2-person—add 10 percent; 3-person—add 5 percent; 5-person—subtract 5 percent; 6-or-more-person—subtract 10 percent.

Source: Consumer and Food Economics Research Division, ARS, U.S. Department of Agriculture.

TABLE 6.—ESTIMATED COST OF 1 WEEK'S FOOD AT HOME[1]

[U.S. average, January 1963]

Sex-age groups[2]	Economy plan	Basic low-cost plan	Second low-cost plan	Moderate-cost plan	Liberal plan
Children:					
Under 1 year	$2.50	$3.10	$2.70	$3.90	$4.20
1 to 3 years	3.00	3.80	3.20	4.70	5.40
4 to 6 years	3.50	4.50	3.80	5.80	6.90
7 to 9 years	4.30	5.30	4.50	6.90	7.90
10 to 12 years	5.00	6.20	5.20	8.30	9.60
Girls:					
13 to 15 years	5.40	6.50	5.60	8.90	10.20
16 to 19 years	5.50	6.60	5.60	8.80	10.10
Boys:					
13 to 15 years	5.70	7.10	5.80	9.80	11.20
16 to 19 years	6.70	8.40	6.90	11.40	12.90
Women:					
20 to 34 years	4.10	5.50	4.60	7.70	8.70
35 to 54 years	4.00	5.40	4.50	7.50	8.50
55 to 74 years	3.80	5.10	4.10	7.00	8.00
75 years and over	3.60	4.90	4.00	6.60	7.50
Pregnant	5.90	6.90	6.00	9.00	10.00
Nursing	7.20	8.70	7.50	11.10	12.30
Men:					
20 to 34 years	.40	7.30	5.90	9.90	11.10
35 to 54 years	5.10	6.80	5.50	9.20	10.30
55 to 74 years	4.90	6.40	5.20	8 80	9.80
75 years and over	4.70	6.20	5.00	8.40	9.30

[1] These estimated costs were computed from quantities in food plans in tables 1 to 5. Costs are estimated quarterly by Consumer and Food Economics Research Division, Agricultural Research Service, U.S. Department of Agriculture, Washington, D.C., 20250. Current cost figures available on request.

[2] The costs given are for individuals in four-person families. For other size families, the following adjustments are suggested: Family of 1—add 20 percent; family of 2—add 10 percent; family of 3—add 5 percent; family of 5—subtract 5 percent; family of 6 or more subtract 10 percent.

[From the Cleveland, Ohio Plain Dealer, June 28, 1969]

EXCLUSIVE MIGRANTS FED RED-TAPE DIET

(By Richard C. Widman, Staff Writer)

FREEMONT, OHIO.—If rules and red tape were food, some 6,000 to 8,000 Mexican-American migrant workers who have been made idle in the Sandusky County area by an abundance of rainy and cold weather would not be going hungry.

They think they are entitled to federal food stamps as a right. County officials say the rules must be followed, and this takes time.

Some of the migrants say the farmers have told them there will be work within four or five days if the newly arrived dry weather continues. But others have been told the ground is so soggy that it will be two or three weeks before they can get into the fields even if there is no more rain.

It is not a "Grapes of Wrath" situation. The migrants are not starving.

But their rations of frijoles, tortillas and rice are skimpy.

"Just give a Mexican some beans and some rice, and a piece of meat now and then, and he's happy," one migrant told this reporter.

But he said his family has not had money for the piece of meat recently, and there were not enough beans and rice to go around. He estimated that most of the migrants who live in his camp south of Freemont are eating about one third less than normal.

That they are deeply in debt and may go home next fall even more in debt is heard from every migrant.

These are American citizens, most of them from the Rio Grande Valley of Texas. When they all get here, at the peak of the harvest seasons in the pickle, cabbage, tomato and sugar beet fields, there may be as many as 12,000 migrants here in one county.

Published in this article for the first time are reasons why some 200 migrants descended en masse last week on the offices of the Sandusky County Welfare Department. Another 500 or more showed up on Tuesday.

The migrants say the primary reason is, of course, very simple. They were hungry and looking for help.

But the Sandusky County commissioners and Welfare Director Carleton H. Peck suspect that it was some kind of effort to "harass" the welfare department, and perhaps the beginning of an effort to unionize the migrant workers.

"Not so," said Mrs. Nancy B. Kidney, director of the Sandusky County Opportunity Center here, which operates with federal Office of Economic Opportunity funds.

"We've told the unions to stay away," Mrs. Kidney said.

She admitted, however, that the visits to the welfare department were indeed "confrontations."

For three years now, Mrs. Kidney said, the county welfare department's rules and red tape have made it difficult and sometimes impossible for migrant workers to get the help to which they are entitled.

The situation was aggravated this spring, she said, by wet weather which put more workers than ever in need.

Conserving Sandusky County's general welfare funds is one thing, the center director said, but there is no good reason why federal food stamps should not be made readily available to the migrants with a minimum of red tape.

She said some had applied three times for the stamps but were never notified they were not to get them, or why.

Mrs. Kidney said she had tried to meet with welfare director Peck to discuss the problem but was rebuffed. The county commissioners told her that she would have to deal with Peck, and that the commissioners could not help her, Mrs. Kidney said.

"Fed up" with the situation, she told Daniel Lopez, and Opportunity Center aide, to visit the migrant camps and find those who were in need and instruct them to go to the county welfare office to apply for aid.

Police were called to stand by at each "confrontation" but were not needed. Peck said the migrants were orderly.

Mrs. Kidney said that Peck calls the police every time a few migrants show up at his office.

Fifty-two heads of migrant families applied for aid last Friday, and an estimated 150 on Tuesday. Most asked for food stamps, and some for general welfare.

In an interview with this reporter, Peck professed ignorance why the large groups visited his office.

He said he suspected "harassment" but would not definitely call it that, nor did he know why anyone would want to harass his office.

Peck did not mention the subject of his differences with Opportunity Center officials. He professed bewilderment as to what it is all about.

All applications will be carefully processed, Peck said but he could not estimate how long it would take for the paper work to be completed.

Peck pointed out that Sandusky County has budgeted only $62,000 for general welfare this year and said the money would be exhausted quickly if dispensed indiscriminately.

He showed the medical payments record for a migrant worker who became ill last summer, a total of more than $4,000.

"One case can run up a big bill," Peck said.

The welfare director reported that the county commissioners have been bombarded by complaints from longtime residents who do not want "their" welfare money paid out for food and medical care for migrants.

A county commissioner admitted to this reporter that he had received many such calls, but avoided further discussion of the subject.

About 5,000 Mexican-Americans, formerly migrant workers, are now year-round residents of the Fremont area, Peck said.

Peck said he doubted that the migrants have a need for help now. He doubted that they are as broke as they say.

Growers, the people who hire the migrants, tell him they have paid the migrants well this year and they should have money in their pockets, the welfare director said.

At the same time, Peck admitted that perhaps the migrants have not had as much work as usual because of the wet weather.

"The trouble with people here," Mrs. Kidney remarked, "is that they think these migrants come up here only to get money to drink and have a good time."

"They don't realize that they have bills to pay and obligations to meet, here and back home where other members of their families are, the same as anyone else," she said.

Opportunity workers said interviews with the migrants revealed that the families have run up average debts of $350, in addition to normal debts.

"People shouldn't have to borrow money to buy food," Mrs. Kidney said.

Migrants have borrowed money from the farmers for whom they agreed to work. The amounts are small, not because the farmers are not willing to lend more, but because the migrants hesitate to ask for more.

"They're sticking together, keeping their problem to themselves until it becomes a crisis," Mrs. Kidney said. "Self-reliance is a characteristic of these people, a character trait we try to teach our own kids."

Everyone speaks highly of the migrants as hard-working types, which is why county officials, they say, cannot understand why the migrants are asking for help.

"Certification" is the big barrier for the applicant who seeks food stamps.

In Sandusky County this means the applicant must be able to show his recent pay slips and records of his bank deposits and debts in order to establish his need.

"They're asking for verification that these people can't give," Mrs. Kidney insisted.

Complicating the problem, the center director said, is Sandusky County's insistence on weekly recertification, which means that the entire process must be gone through again. Some migrants, she said, cannot afford the gasoline to drive to the welfare office.

Other counties are more flexible in regard to food stamp rules, she said.

"It's not welfare," Lopez remarked. "It's something the people have a right to."

"Why do they have to be degraded and made to feel less than human?" Mrs. Kidney asked.

"Sure other counties are more flexible," countered Robert W. Roush, a Sandusky County commissioner. "We're going according to the book because it's the law."

County Commissioner Lee Snow, the chairman, said all three commissioners believe some attempt is being made to organize the migrants.

Roush pointed to the fact that Bruce E. Thomas of Columbus, head of the Ohio Steering Committee for Adequate Welfare, accompanied the migrants to the welfare office Tuesday.

Mrs. Kidney said it was a coincidence that the controversial Thomas was in Fremont that day, and said that it was his own idea to accompany them.

"I've tried to keep the organizers away, to keep this out of the limelight," she said.

The migrants have no complaint about the treatment they are receiving from the farmers, or about the housing assigned to them. They say it is much better than it used to be.

Some food stamp money is trickling through, migrants admitted. But they said that it is inadequate.

To help them in the crisis the center is handing out emergency food orders averaging about $15 a family. This money comes from special federal funds reserved for "act of God" emergencies.

(The average migrant family numbers 7.2 persons, including those here and those back home, Mrs. Kidney reported.)

David Sunderland, agriculturalist for the Northern Ohio Sugar Co., which indirectly employs about 600 migrants, said they have made good money this year. He has shown the records to the welfare director Peck.

Sunderland said he could not understand why they were seeking help. He also suspects an organizing effort.

The migrants denied having been contacted by organizers. They went to the welfare office, they said, because they needed help and were told they could get it there

Hope Garcia is a pretty 17-year-old girl from Pharr, Tex. With a slim figure she would appear to be better suited to working at a drive-in as a carhop rather than at the backbreaking labor of hoeing fields.

Asked why she is looking for work in the fields for the third straight year, she replied: "It's the way we have to live."

Last year her father, Jose Garcia, her mother, a brother and a sister made a total of about $2,000 here. This year Jose and Hope came alone. They have made $114 to date, most of which was sent back home.

They borrowed $15 from "our farmer," have received an emergency food order and last Monday received $8 worth of food stamps for which they paid $1 cash.

The father and daughter were told not to apply again until Tuesday. It will take more paper work and more time to get another authorization for food stamps.

Greg Nava, 20, and his bride, Chris, also are from Pharr. They got here six weeks ago and so far have earned a total of $60, which has run out.

They got an emergency food order and last Monday paid $1 cash for $8 worth of food stamps. They can not go back for more food stamps until Tuesday.

Department of Agriculture,
Office of the Secretary,
Washington, D.C., May 25, 1970.

Hon. Walter F. Mondale,
Chairman, Subcommittee on Migratory Labor,
Committee on Labor and Public Welfare,
U.S. Senate.

Dear Mr. Chairman: We are pleased to supply the information and program data that you requested on our family feeding programs and migrant workers and their families.

With respect to our family food assistance programs, we believe that the problems associated with the full participation of migrant workers need to be viewed in two segments: (1) when the family is residing in its home-base area, and (2) when the family is in the migrant stream in user States.

When the migrant family is in its home base-area, its problems closely resemble those of other low-income families in need of food assistance. A family food assistance program must be available in the home-base area and needs to be financed and operated by cooperating State and local agencies in a manner that will be responsive to the needs of all low-income families in the area, including migrant worker families.

During the past 18 months we have placed a top priority on actions to insure that all of the 3,129 counties and independent cities in the United States do offer food assistance to low-income families either through USDA's Commodity Distribution or Food Stamp Programs. As of May 15, we have commitments from all but 73 of these 3,129 counties and cities that they will undertake a family feeding program. As of the same date, a program was actually operating in 2,849 counties and independent cities. We expect to shortly obtain a commitment from the remaining 73 areas.

Thus, we do expect to complete the first essential step—program availablility on a nationwide basis—in the immediate months ahead. Once this priority task is completed, we will need to give increased attention to assisting States and localities in achieving the quality of program operations that will make these programs truly responsive to program need.

One step of significance for migrant families has already been taken to improve program quality in our Commodity Distribution Program. Revised Federal regulations were issued that prohibit the establishment of citizenship or durational residence requirements in State or local eligibility standards for the Commodity Distribution Program. (Citizenship or durational residence requirements were not authorized under the Food Stamp Act of 1964. Thus, no corrective action was needed under that program.)

When the migrant family is in the user stream, the problems are different. In part, these problems arise out of the mobility of the migrant worker; the constantly changing composition of the migrant family as it moves in the migrant stream; and the fluctuations of family income while it travels in user States. Our experience indicates that a very large proportion of the migrant worker families have monthly incomes that exceed eligibility standards when they have employment in user States.

Their eligibility for food assistance occurs when they encounter periods of unemployment or underemployment—because work is not available for all migrants that come into a user area or because weather conditions have resulted in an even shorter-term period when the fields cannot be worked. These relatively short-term, and difficult-to-predict, needs for food assistance present difficult problems in programs that are based upon the certification of the economic position (the income and resources) of individual family units.

At our request, the Cabinet-level Rural Affairs Council is considering what actions can be taken, on a coordinated basis by involved Federal agencies, to alleviate the problems associated with the projected decline in work opportunities for migrant workers. We also intend to keep the State agencies administering our food assistance programs informed of available intelligence on emerging problem areas to assist them in anticipating where needs may quickly develop for USDA family food assistance for migrants.

Sincerely,

Richard Lyng, *Assistant Secretary.*

Enclosures.

1. GENERAL QUESTIONS AS TO INFORMATION GATHERING EFFORTS AND CONTINGENCY PLANNING FOR MIGRANT NUTRITION PROBLEMS.

1. (a) HOW DO YOU GATHER STATISTICAL INFORMATION CONCERNING THE OVERALL OPERATION OF THE FOOD STAMP AND COMMODITIES DISTRIBUTION PROGRAMS? IS SUCH DATA USED FOR PURPOSES OTHER THAN BUDGETING? IF SO, HOW? HOW MANY AGENCY PERSONNEL ARE REGULARLY ASSIGNED TO THE GATHER OF SUCH INFORMATION? WHAT WAS YOUR BUDGET REQUEST AND YOUR BUDGET AUTHORIZATION FOR SUCH ACTIVITIES INCLUDING PERSONNEL ESTIMATES FOR FISCAL YEARS 1968, 1969, AND 1970?

1. (a)

As part of their agreements with the Food and Nutrition Service (FNS), participating areas and States provide regular monthly reports on the size and scope of family feeding programs.

For the Food Stamp Program, a monthly report is submitted by areas and States showing the number of households and number of persons participating for the month being reported; the number of households and persons participating at the minimum purchase requirement; the amount of the coupons distributed, the value of purchased coupons and the value of free coupons. These data are reported separately for households classified as assistance and non-assistance households. (See attachment 1(a)1.) Enclosed are copies of the compilation of such monthly reports since 1967 (attachment 1(a

A second monthly report is provided by cooperating State agencies which provides an accounting for the bulk supplies of coupons made available to States and for the sums collected from recipients as the charges for the coupons.

For the Commodity Distribution Program, the monthly report submitted by areas and States shows the number of certified eligibles; the number of participants, classified by assistance and non-assistance categories; and the names of the individual commodities distributed during the month for which the report is submitted. (See attachment 1(a)3.) Enclosed are the monthly reports since 1967 (attachment 1(a)4). A second report is submitted by States which shows the quantity of various commodities distributed by type of eligible outlet. (See attachments 1(a)5 and 1(a)6.)

These reports, supplemented by spot checks, reviews, audits, and special surveys, are basic tools for program evaluation and direction, as well as for program accounting and budgetary purposes. As indicated above, they are prepared by the cooperating areas and States. They are used by field and Washington personnel of FNS as an integral part of program supervision and direction and for public reporting. It, therefore, is not possible to determine, separately, the number of Federal manhours devoted to assisting States and localities in establishing their reporting activities, the compilation of such reports, or the portion of supervisory time devoted to the evaluation and use of such reports in program direction and improvement.

1. (b) DO YOU ASSIGN STAFF MEMBERS TO PERFORM INDEPENDENT EVALUATIONS OF COLLECTED DATA FOR PURPOSES OF MONITORING EXISTING PROGRAMS OR AIDING CONTINGENCY PLANNING FOR FUTURE OPERATION AND/OR EMERGENCY PLANNING? IF NOT, WHY NOT?

Because the use of information on program operations is an integral part of program direction and supervision, it has not been deemed to be an efficient and effective use of FNS to separate out the evaluation of program data from basic responsibility for program operations. The Washington headquarters of FNS does, however, maintain a Program Reporting Staff which is responsible for the compilation of the program reports received from cooperating State agencies.

FNS does utilize the resources of the research agencies of the Department, or contracts with outside agencies to perform special studies and surveys of program operations and impacts. The staff of USDA's Office of the Inspector General also performs independent audits of FNS programs which cover both program and fiscal aspects.

1. (c) DO YOU RELY ON RECORDS AND INFORMATION FURNISHED THE DEPARTMENT PURSUANT TO RECORD KEEPING REQUIREMENTS OF THE FOOD STAMP ACT, REGULATIONS, AND INSTRUCTIONS PROMULGATED THEREUNDER? IF SO, PLEASE DESCRIBE THE SYSTEM EMPLOYED? IF NOT, WHY ARE SUCH AVAILABLE INFORMATION SOURCES NOT REGULARLY EMPLOYED IN MONITORING AND PLANNING ACTIVITIES?

The basic information obtained from cooperating areas and States pursuant to the provisions of the Food Stamp Act is described in answer 1 (a).

1. (d) IN MAKING PROJECTIONS FOR THE NUTRITIONAL NEEDS OF POPULATION GROUPS SUCH AS MIGRANTS, DO YOU CONSIDER OR RELY UPON DATA FURNISHED BY ANY OTHER AGENCY OF THE FEDERAL GOVERNMENT OR THE EXECUTIVE DEPARTMENT, PARTICIPATING STATES, INDEPENDENT RESEARCH ORGANIZATIONS, CONGRESSIONAL COMMITTEES OR CONTACTS WITH INDIGENOUS MIGRANT GROUPS? IF SO, PLEASE PARTICULARIZE INFORMATION SOURCES AND ATTACH SUMMARIES OR COPIES OF ALL INFORMATION CONSIDERED IN MAKING PROJECTIONS FOR THIS SUMMER. IF ANY OR ALL OF THESE SOURCES HAVE NOT BEEN UTILIZED, WHY NOT?

The nutritional needs of households eligible for family feeding programs are derived from the Recommended Dietary Allowances of the Food and Nutrition Board of the National Research Council. Under the Commodity Distribution Program, these allowances are used to assist in determining the kinds and quantities of food commodities to be made available for donation to States. Under the Food Stamp Program, the value of the total monthly coupon allotments to be made available to participating households is based upon the retail cost of an economy diet plan developed by USDA's Agricultural Research Service.

The above sources are universally regarded as the definitive sources of information on the nutritional needs of the U. S. population and the cost of adequate diet plans developed from the Recommended Dietary Allowances.

1. (e) BASED ON INFORMATION TO WHICH YOU HAVE ACCESS, WHAT IS YOUR BEST ESTIMATE OF THE NUTRITIONAL AND EMERGENCY NEEDS OF MIGRATORY WORKERS THIS SUMMER? (PLEASE DISCUSS THE ANTICIPATED LEVEL OF PARTICIPATION OF MIGRANTS IN FOOD STAMP AND COMMODITY DISTRIBUTION PROGRAMS, WHETHER THIS LEVEL CONSTITUTES AN INCREASE OR DECREASE OVER THE LAST YEAR, AND THE NATURE AND EXTENT OF ANY ANTICIPATED HUNGER EMERGENCIES.) DO YOU HAVE ANY CONTINGENCY PLANS BASED ON SUCH INFORMATION. IF SO, PLEASE DETAIL, INCLUDING SPECIFICATION OF SOURCE OF THE PLAN AND A SUMMARY OF THE OPERATIVE PROVISIONS OR TEXT OF SUCH DOCUMENT.

We are anticipating that there will be an increased need this year, compared to last year, for food assistance among migrant worker families because of the projected decline in work opportunities for migrants.

We would anticipate that some former migrant families will not move out of their home-base area and will continue to be eligible for and participate in the USDA family feeding program in their home-base area this summer. We further anticipate that, compared with last year, a larger number of migrants who move into user areas may experience longer periods without employment. In addition, we anticipate a continuation, and probably an intensification, of temporary periods of unemployment or underemployment because weather or other conditions may result in late harvest schedules or a temporary stoppage of work in the fields.

For the unemployed or underemployed migrant worker who elects to remain in his home base this summer, food assistance will be available through the USDA family food assistance program operating in his home county.

A. Effective January 1970, FNS issued instructions that prohibited States and participating areas within States from establishing any durational residence or citizenship requirements in their eligibility standards for USDA family food programs. This action was of special significance for the migrant family.

B. FNS has undertaken an intensified program in the past year to bring all of the 3,129 counties and independent cities in the United States into a family feeding program--either Commodity Distribution or the Food Stamp Program. In a furtherance of this effort, it is deferring all requests for the Food Stamp Program from areas that operate a full-coverage commodity program so that food stamp funds available for geographic program expansion may be made available to begin a stamp program in areas without a USDA food program or areas that operate a partial commodity program.

As of May 15, there remained only 73 counties and independent cities that have not made a commitment to begin a family feeding program. There were an additional 208 such areas that had agreed to begin a program but had not completed local arrangements for the distribution of commodities or the issuance of food stamps.

With an anticipation that we will shortly receive a commitment from the remaining 73 counties and independent cities, FNS intends to work with States to place a priority on the implementation of programs in any non-operating areas where migrants are an important factor.

A. For the workers who move in the migrant stream, food assistance can be made available through the USDA family food assistance program operating in the area in which the migrant is faced with unemployed periods. Through the Special Task Force of the Cabinet-level Rural Affairs Council, USDA is working with other Federal agencies to develop and coordinate Federal programs to assist migrants during this summer.

B. FNS is alerting State cooperating agencies to the projected increase in unemployment among migrants in user areas, now that preliminary projections of the possible problem areas are available. It has also been working with the Farm Labor Service of the Department of Labor to receive continuing intelligence as to the emerging potential problem areas as the season progresses so that cooperating State agencies may be alerted.

C. Cooperating State agencies will be encouraged to make full use of existing authorities to make preliminary certification determinations which permit households with an immediate need for food assistance to be certified for a 30-day period while final verification of eligibility is being documented.

D. Through the Special Task Force of the Rural Affairs Council, FNS has recommended that all Federal, State and other agencies concerned with migrant workers within user States be provided with the names of the State agencies responsible for intrastate administration of the Commodity Distribution and Food Stamp Programs. This recommendation was made to the Council in an effort to improve intrastate communication channels concerning emerging problem areas.

1. (f) DOES YOUR DEPARTMENT CONSIDER MIGRANTS TO BE A SPECIAL CLASS REQUIRING SPECIAL TECHNIQUES AND PROCEDURES TO ENABLE THEM TO PARTICIPATE IN FOOD STAMP AND COMMODITY PROGRAMS?

With respect to family feeding programs, FNS believes there is a distinction between the migrant worker family when it is in its home base and when it is in the migrant stream.

When the migrant family is residing in its home base, the unemployed or underemployed migrant family more closely resembles other needy families in the area. Efforts here are directed to the broad problems of making the existing family assistance program responsive to the needs of all eligible households in the area. For the first time, USDA is now making Federal funds available to States under the Commodity Distribution Program to assist States to begin a program in those areas that were not operating a family feeding program and to improve the level of services in operating areas. (The extent of Federal contributions for intrastate costs of operating the Food Stamp Program are set forth in the Food Stamp Act and have been available since the Act was passed in 1964.)

Migrant workers and their families while in the migrant stream do present special problems because of: (1) their mobility; (2) the frequently short-term and unpredictable patterns of their need for food assistance; (3) the constantly changing composition of the migrant family as it moves in the migrant stream;and (4) the difficulty of projecting the current incomes of individual migrant families. The latter two factors are of special significance in the Food Stamp Program because the level of coupon charges and the amount of the Federal assistance (the bonus coupons) is related to the current income and size of the family.

These problems are enhanced, currently, because eligibility standards for family feeding programs are related to State welfare standards and, thus, vary from State to State.

The Administration, in its proposed amendments to the Food Stamp Act, has requested that these State-by-State standards be replaced by uniform national eligibility standards. When authorized, eligibility standards for the Commodity Distribution Program would be changed to the uniform standards authorized for the Food Stamp Program.

1. (g) HAS THERE EVER BEEN A STUDY OF THE SPECIAL CHARACTERISTICS OF MIGRANTS TO DETERMINE WHETHER SPECIAL ELIGIBILITY STANDARDS CAN BE APPLIED IN A MANNER CONSISTENT WITH THE PURPOSE OF THE FOOD STAMP SEGMENT OF THE POPULATION, AND WHAT THOSE STANDARDS SHOULD BE? IF NOT, WHY NOT?

Yes. The Food and Nutrition Service has had an informal Task Force, representing staff involved with both family and child feeding, that has been studying the problems of migrant workers. Members of this Task Force have made field inspections and have worked with other Federal agencies concerned with the migrant worker and his family.

The Task Force has concluded, because of the factors outlined in 1 (f) above, the regular eligibility and certification procedures provided for in the Food Stamp Act do create special problems for the migrant worker family, especially when the family is in user areas. Even legislation to make possible the establishment of uniform national eligibility standards would not eliminate all such problems.

Study has been given, assuming that uniform national eligibility standards were authorized, to the possibility of annual certifications in the home-base areas, based upon past income patterns and the probability that such patterns would continue in the then-current season. However, such certifications would only identify the probable "annual average" position of the migrant family with respect both to income and family size. Thus, it would still be necessary to identify the current income and size of such households as they move into the migrant stream to determine the charges to be made for the coupons and the value of the total coupon allotment to be provided as well as the expected duration of the unemployment or underemployment.

The necessity of making such determination on a current basis, and on an individual household basis, is essential if the Food Stamp Program is to be practically available to migrant families while they are in the migrant stream. These same two factors also present special staffing problems to the participating States and localities when a significant number of migrant workers face a very short-term need for food assistance because of weather or other unpredictable factors.

FNS is currently participating, as a supporting agency, in a program being conducted by the Rural Manpower Service of the Department of Labor, known as the Experimental and Development Program for Migrants. This project will identify approximately 750 migrant families from Hidalgo and Cameron Counties, Texas, and will follow these families through the migrant stream in northern user States and through their return to the Rio Grande Valley. It is hoped that the data collected on these study families may point the way to more effective eligibility and certification procedures for migrants under our family feeding programs.

2. FOOD STAMP AND COMMODITY PARTICIPATION, DATA REQUESTED FOR FISCAL YEARS 1967, 1968, AND 1969, AND THE CURRENT FISCAL YEAR:

2. (a) A BREAKDOWN AND STATISTICAL ANALYSIS OF THE TOTAL NUMBER OF PUBLIC ASSISTANCE AND NON-PUBLIC ASSISTANCE PARTICIPANTS IN THE FOOD STAMP PROGRAM FOR FISCAL YEARS 1967, 1968, AND THE CURRENT FISCAL YEAR IF AVAILABLE, IN ALL STATES THAT ARE EITHER "HOME BASE" OR "USER" STATES OF MIGRANT AND SEASONAL FARM LABOR. SIMILARLY, PROVIDE TABLES SHOWING THE RATIO OF PUBLIC ASSISTANCE AND NON-PUBLIC ASSISTANCE BENEFICIARIES IN THOSE STATES FOR THE ABOVE LISTED YEARS.

Copies of the monthly reports for both the Food Stamp and Commodity Distribution Programs have been provided in attachments 1(a)1 and 1(a)2.

2. (b) A BREAKDOWN AND ANALYSIS WITH RESPECT TO MIGRANTS AND SEASONAL LABORERS WHO PARTICIPATE IN THE NON-PUBLIC ASSISTANCE PROGRAMS IN THE SAME FORMAT AS PROVIDED FOR (a).

Such data are not available.

2. (c) IF THE UNDERLYING STATISTICS AND OTHER DATA ARE NOT AVAILABLE TO ANSWER PARTS (a) AND (b) OF THIS QUESTION, EXPLAIN IN DETAIL THE REASONS FOR THE UNAVAILABILITY. ALSO DISCUSS THE ASSUMPTIONS, EMPIRICAL DATA, OR OTHER BASES GOVERNING YOUR ADMINISTRATION OF THESE PROGRAMS.

It has not been deemed feasible or practical to request States and areas to identify and classify the categories of participants, or the reasons for their eligibility beyond identifying such families as being welfare or non-welfare families. Such a requirement would be both time-consuming and costly for the States, with innumerable problems of classification, e.g., even in the single matter of distinguishing between seasonal and migrant laborers, or accurately identifying migrant workers in their home-base area. It is deemed that increased State and local staff time and operating budgets should be devoted to improving recipient services rather than to a more complex and detailed reporting service.

2. (d) IN LIEU OF STATISTICAL DATA OR SUPPLEMENTAL THERETO, DESCRIBE C&MS'S MONITORING SYSTEM, IF ANY AT THE STATE AND LOCAL LEVEL, TAKING INTO ACCOUNT ALL STATE AND LOCAL DEVIATIONS.

In addition to the use of the above reports on the scope of family feeding operations, FNS monitors program operations through the following:

(a) On-the-spot monitoring by field and regional offices of FNS;

(b) Administrative reviews of State agency operations;

(c) Investigations of specific complaints received, including those from individual recipients;

(d) Independent audits or investigations of the Office of the Inspector General or the General Accounting Office; and

(e) Special studies and surveys.

2.(e) IN STATES WHERE THERE IS A HIGH DEGREE OF MIGRANT PARTICIPATION IN NON-PUBLIC ASSISTANCE PROGRAMS FOR THE ABOVE YEARS, WERE SPECIAL PROCEDURES EMPLOYED FOR CERTIFYING MIGRANTS? IF SO, PLEASE DESCRIBE, MAKING REFERENCES TO RESPONSE TO QUESTIONS (3) WHERE APPROPRIATE. IF NOT, PLEASE EXPLAIN:

Based upon operating experience, the capacity to serve the food assistance needs of migrants when they lack employment in the migrant stream is based upon the extent of advance intelligence of potential emergency problems and the fiscal and administrative capacity of the State and/or local operating agencies to increase certification and other staff to meet the sudden influx of migrant worker families in need of food assistance, through the assignment of additional personnel, added costs of overtime work, etc. The use of the previously discussed preliminary certification procedures also is important where a prompt response is necessary to meet short-duration needs.

2. (f) HAVE ANY SUCH PROCEDURES BEEN DEVELOPED IN THE DEPARTMENT AND RECOMMENDED TO THE STATES TO AID THEM IN EXPEDITING CERTIFICATION OF MIGRANTS?

As previously discussed, FNS is alerting States to the general nature of the anticipated migrant worker problem this summer and will provide them with the available projections of anticipated problem areas. It will encourage States to make effective use of preliminary certification procedures and will cooperate with other agencies in attempting to develop continuous intelligence on emerging problem areas.

2. (g) WHAT REGULATIONS HAVE YOU DEVELOPED TO INSURE THAT STATES PARTICIPATING IN THE COMMODITY DISTRIBUTION PROGRAM PARTICIPATE FULLY, BY DISTRIBUTING ALL ITEMS ON THE USDA LIST?

Some States and local jurisdictions have had physical and fiscal constraints that have prevented them from distributing certain foods, such as insufficient warehousing facilities, lack of refrigeration for perishable commodities, or lack of enough vehicles for transporting commodities. In addition, some States report that local eating habits (i.e., New York State and other northern States just cannot, at this time, make proper utilization of available corn grits), make it impractical to order and attempt to handle certain of the available commodities. As better nutrition education becomes available to all participants, it is hoped by the Department that each participating State agency will be able to accept and utilize the maximum available commodities.

Through the use of recently authorized money (Operating Expense Funds for States), the Department hopes to encourage State distributing agencies to participate more fully in the distribution program by distributing the maximum number of items available from the Department of Agriculture.

2. (h) WHAT INSTRUCTIONS, IF ANY, HAVE YOU ISSUED TO THE STATES TO ENCOURAGE SUCH FULL PARTICIPATION? IF NO SUCH INSTRUCTIONS HAVE BEEN ISSUED, PLEASE EXPLAIN REASONS FOR NOT ENCOURAGING FULL PARTICIPATION?

We do issue Guidelines for use by the States in issuing commodities. These Guidelines are periodically adjusted as new foods become available. A copy of the Guidelines is attachment 2(h)1.

Also attached is CD-Sc70 which provides the amount of each food per person that was available as of April 1, 1970, (2(h)2).

3. OUTREACH EFFORTS FOR FOOD STAMP AND COMMODITY DISTRIBUTION PROGRAMS

3. (a) FOR THE YEARS AND STATES DISCUSSED ABOVE, WHAT STATISTICAL METHODS ARE EMPLOYED TO MONITOR OUTREACH EFFORTS BY LOCAL OFFICIALS IN COUNTIES IMPACTED WITH MIGRANTS? IF SUCH DATA IS NOT EMPLOYED, WHAT ADMINISTRATIVE MONITORING DEVICES ARE EMPLOYED?

Answer:

Outreach programs are not monitored through a regular reporting system. Much of the outreach program is conducted as part of the expanded nutritional program for which the Agriculture Extension Service is responsible. Staff members, on a trip to Hidalgo County, Texas, which provides a substantial number of migrants for user States, visited with the Home Demonstration Agent responsible for the expanded new nutrition program in the county. She has 29 nutritional aides all of whom speak Spanish and make working visits to needy migrant families. These nutritional aides and the Home Demonstration Agent have done a remarkable job in teaching the migrants how to use the Department's donated foods.

The expanded nutrition program uses nutritional aides hired from the poverty population who speak the language of the households where they make working visits. These are face-to-face consultations in which the homemakers are educated to use either Food Stamps or commodities. The material in attachments 3(a)1 and 3(a)2 is evidence that this program is meeting some degree of success.

The Cooperative Extension Service began an educational program, the Expanded Food and Nutrition Education Program about 18 months ago designed to help the hard-to-reach poor improve their diets. Special efforts have been made to extend the program to minority racial groups, migrants, and others with special problems.

Program aides who live in the community in which they work and who can communicate verbally with the families to be reached are employed and extensively trained in basic nutrition, meal planning, food buying, food preparation, management of their resources, use of food assistance programs, and other community resources.

As of February 28, 1970, 6,356 aides were employed in nearly 1,000 locations. More than 460,000 families have been worked with since the beginning of the program. It is anticipated that by June 30, 1970, the number of aides will reach about 7,500, who will be working in more than 1,000 locations. As more funds become available, the program will be further expanded with more aides and to new locations.

While not singled out as a specific target group, the Expanded Food and Nutrition Program has reached migrant families both at home base and as they follow the crops. The following excerpts taken from reports from Florida and Texas are typical of work done in other States as well.

Extension aides working the Food and Nutrition Education Program of the Cooperative Extension Service have worked with migrant families in Texas and Florida since the beginning of the program early in 1969.

In Polk County, Florida, the wife of a migrant group leader works as an Extension aide with about twenty families, some migrants. When some migrant families leave for the summer the homemaker asks the aide to resume work with them when they return, and several have asked to be referred to Extension aides in locations where they will harvest crops during the spring and summer.

The following is taken from a Texas report, October, 1969: "In two counties bordering Mexico, Cameron and Hidalgo, Texas, twenty-nine aides worked with 215 migrants out of 2,168 families enrolled in 1969. This work was done between January and August. In one of these counties 36 families that had formerly been migrants did not leave this year.

"Five of the aides had been migrants. One said she would have been a migrant if she had not been an aide. Another was angry with her husband because he was sitting around rather than getting a job in the areas. She felt that if there was a job for her, that probably there was a job he could do also.

"The aides visited the migrant families on an average of twice a month and taught: Nutrition, meal planning; food budgeting, selection and buying; food preparation; safety; storage and sanitation; gardening in rural areas.

"They counseled with families on the many services available and where to go for them. Consequently, many children were immunized. Others were given badly needed medical and financial assistance by different organizations and agencies.

"The older homemakers believed milk was for children, and that salads including potato salads were for weddings. Many of the homemakers had started making salads for family meals. One homemaker said that when she went to the grocery store she would think of what the aide had taught her.

"In one county, forty of the 124 migrant families received donated foods. When the aides started working they observed that the families had shared their donated foods with other families. But after the aides had worked a while, they noticed that the families stopped sharing and started using all the foods in their own meals. The women started baking so much of their own bread that a small Mexican bakery complained that they did not buy their breads any more and the women were feeling a bit guilty.

"In one county where the aides were working with an average of 40 migrant families over the six months period many changes were reported. I will give you examples taken from the records. Thirteen families planned and prepared meals according to the basic four; 7 were eating breakfast who had not eaten the meal previously; 35 were serving more vegetables at meal time; 15 were serving more salads; 5 were drinking milk, 6 were serving more cheese in meals; all receiving donated foods were making better use of them; 5 were cooking meat properly, 35 were cooking vegetables properly; 20 were making their own bread and cookies instead of buying at the store; and 15 were making their own master mix instead of buying biscuits and pancakes.

"All 40 had improved food storage by using large tight sealed containers for flour and cereals; storing vegetables and bread properly; keeping powdered egg mix in the refrigerator after opening; storing food and equipment in the kitchen area.

"Twelve of the families started buying for cash instead of credit and all started doing comparative food shopping.

"All improved sanitation in some way. Some of the things done included regular cleaning of refrigerator and range; a cleaner and neater kitchen; lids on garbage cans; insect and rodent control (demonstrated by county agricultural agent); washing hands before preparing food and eating; and proper dish washing.

"As a result of the program the agents have had requests for recipes for using donated or low-cost foods from San Antonio, California, Wyoming, Michigan, and Ohio. One aide sent two copies of recipes to a family that had moved to Yorktown where there were no aides. The recipes were useful and it was helpful to have many of them written in English and Spanish and in simple language.

"It has been reported that husbands like the changes in their homes. They said "the food is better, the wife cares about her appearance, and the house looks better." So naturally they looked forward to more visits from the aides.

"The aides reported observing that the families were dressed better and cleaner.

"Some homemakers wanted to learn to prepare foods they could sell to single migrant men who live in compounds and sometimes prepare their own food.

"One of the aides in one of the counties had a letter from a Health Department Home Economist at Woodstown, New Jersey wanting to know what she had taught a migrant homemaker so she could do follow-up work with her. The agent sent her this information but to date had no further information."

The agents reported that the aides asked the migrants to remember what they had been taught and eat by the four food groups if possible. The aides continued to work with these families when they returned home. On April 1, 1970, 1,583 families were enrolled in the Food and Nutrition Program and on April 30, 1970, 244 of these had started their annual journey to harvest crops elsewhere. (Hidalgo County, Texas)

See attachments 3(a)1 and 3(a)2.

3. (b) HOW IS THE EFFECTIVENESS OF THE PROGRAM JUDGED? IS ANY FORM OF COMPLAINT OR GRIEVANCE PROCEDURE AVAILABLE? IF SO, DESCRIBE WITH PARTICULARITY.

Answer:

Refer to 4. (b).

3. (c) ARE THERE ANY MANDATORY STANDARDS RELATIVE TO OUTREACH PERSONNEL FURNISHED BY PARTICIPATING STATES? IF SO, DO THESE STANDARDS TAKE INTO ACCOUNT THE PARTICULAR CHARACTERISTICS OF MIGRANTS? IF NOT, WHY NOT?

Answer:

There are no mandatory standards; but we have tried to recruit from the poverty population persons with the same language, speech, and work backgrounds as migrants in order to bridge the communication gap. This is also done for other target groups such as the aged, Indians, and tenant-farmers.

3. (d) HAS THE DEPARTMENT GIVEN CONSIDERATION TO REQUIRING OR SUGGESTING THE UTILIZATION OF INDIGENOUS MIGRANT GROUPS OR ORGANIZATIONS SERVING MIGRANTS TO ASSIST IN OUTREACH EFFORTS? IF NOT, WHY NOT?

Answer:

Yes, this has been done using individuals and groups of individuals, through the use of pamphlets, and Handbooks for Volunteers. See attachments labeled 3(d). A concerted effort is being made to attain a greater involvement with the communities with reference to the needs of migrants. Use has been made of Vista Volunteers, church groups, 4-H Clubs, and a number of other volunteer groups.

4. CERTIFICATION PROCEDURES FOR FOOD STAMP AND COMMODITY DISTRIBUTION PARTICIPATION

4. (a) IN AREAS IMPACTED WITH MIGRANTS, WHAT STEPS HAS THE DEPARTMENT TAKEN TO ENCOURAGE THE COUNTIES TO MAKE ADJUSTMENTS IN DOCUMENTATION PROCEDURES, OFFICE HOURS, SIZE OF STAFF, NUMBER OF SPANISH-SPEAKING OR BILINGUAL PERSONNEL, OR OTHER SPECIAL ARRANGEMENTS THAT WOULD ACCOMMODATE THE NEEDS OF MIGRANTS?

Answer:

It has been a policy of long standing in the Department that States establish eligibility requirements for family feeding programs based on broad Federal guidelines which will apply to all applicants and participants. Under normal circumstances, migratory workers and their families participate in our food assistance programs as "needy" persons, and are certified (whether employed or not) on the same basis as other needy households.

The responsibility to adjust documentation procedures, office hours, size of staff, or other arrangements, rests with State agencies and changes are approved by the Department. Conditions which warrant specific action in this area are normally brought about through on-site reviews by State personnel responsible for monitoring local program operations, Federal reviewers, public officials, or private citizens or groups.

When specific circumstances are brought to the attention of the States or the Department, every effort is made to simplify certification and to expedite food distribution to migrants or other groups in unusual or distress situations. Examples of such adjustments are shown in attachment 4(a)1.

Recently, the Department made available to States participating in the Commodity Distribution Program Operating Expense Funds to expand and improve their Commodity Distribution Programs, but some States have not as yet taken advantage of the offer. The Instruction issued to States on the use of these funds includes a section on "Standards of Excellence for Needy Family Distribution Programs." This section contains the desirable criteria which the Food and Nutrition Service has determined to represent an exemplary Commodity Distribution Program. A copy is attached and labeled 4(a)2. As previously pointed out, the responsibility for operation still rests with the States and local communities.

State and local jurisdictions have made special distribution arrangements for dense migrant areas by an increase in the number of issuance days, an increase in the number of open hours per day both for certification and issuance, issuance commensurate with the work day of the applicants, certifications made in the growing areas, and establishment of seasonal itinerant certification locations.

In order to overcome physical barriers to participation such as those found in Colorado, some counties have agreed to do certification and issuance for adjacent counties. Such arrangements do come from the local units of government involved.

4. (b) DOES THE DEPARTMENT REQUIRE OR PERMIT A GRIEVANCE AND/OR HEARING PROCEDURE FOR MIGRANTS REFUSED CERTIFICATION? IF NOT, WHY NOT?

Answer:

The Department's Food Stamp and Commodity Distribution Programs Regulations were amended April 9, 1969, and April 3, 1970, respectively. These Amendments require that State Plans of Operation provide a fair hearing to households whose claims for food assistance have been denied or are not acted upon with reasonable promptness; or who are aggrieved by an agency's interpretation of any provision of the plan. The Regulations apply to all applicants and participating households, including migrants.

Now that the Supreme Court has ruled on the Goldberg versus Kelley, ante, case (March 23, 1970), Food and Nutrition Service is in the process of issuing a policy instruction to States setting forth minimum standards to be followed in conducting fair hearings.

4. (c) HAS THERE BEEN ANY CONSIDERATION TO THE DEVELOPING OF STANDARD TABLES TO AID THE DOCUMENTATION AND COMPUTATION OF INCOME FOR THE PURPOSES OF CERTIFICATION AND ELIGIBILITY DETERMINATIONS (e.g., TABLES DEFINING MIGRANTS' INCOME ON YEARLY OR QUARTERLY BASIS, TAKING INTO ACCOUNT PERIODS NOT WORKED AND WITH DEDUCTION FOR NORMAL EXPENSES SUCH AS TRAVEL, RENT, ETC.)? IF NOT, WHY NOT? HAVE ANY ALTERNATIVES TO REQUIRING MIGRANTS TO OBTAIN AND CARRY COMPREHENSIVE RECORDS FROM EACH EMPLOYER OR CREW LEADER BEEN CONSIDERED? IF NOT, WHY NOT?

Consideration has been given to the development of such standard tables but it has not been deemed to be a feasible approach. Such an approach can provide a broad statistical measure of the expected or probable "average" position of an "average" migrant worker family when it is in the migrant stream. However, the period of most critical need for the migrant family is when he is faced with relatively short-term unemployment or underemployment when he is in the user States. Under such circumstances, it is the immediately current position for the individual family that is important rather than the "average" position for the "typical" family. An additional factor is the ever-changing composition of the migrant family during the time it is following the crops.

There is, at present, no requirement for the migrant to carry comprehensive records from each employer or crew leader. It has not been deemed practical or feasible to set forth such a requirement. Nonetheless, the mobility of the migrant family and the substantial numbers of employers for whom he and other family members may have worked does present especially difficult problems in programs which use household income as a determinant of eligibility and the amount of the Federal food subsidy.

4. (d) HAVE ANY TECHNIQUES FOR CERTIFICATION ON A LEVEL WIDER THAN COUNTY-BY-COUNTY BASIS BEEN CONSIDERED OR RECOMMENDED TO PARTICIPATING STATES? IF SO, WHAT TECHNIQUES AND WHAT RESULTED FROM SUCH RECOMMENDATIONS?

Answer:

The use of an ID card which would identify the migrant household as eligible and which would be accepted by all jurisdictions was considered and rejected: one, the household composition of the migrants does not remain constant throughout the crop season; two, the nature of the local units of government in administering the programs is autonomous; and three, eligibility standards are not currently uniform for all jurisdictions of government.

4. (e) HAS A STANDARD QUESTIONAIRE GOVERNING CERTIFICATION OF NON-PUBLIC ASSISTANCE APPLICATIONS BEEN CONSIDERED OR PROPOSED TO PARTICIPATING STATES TO MAKE THE CERTIFICATION PRACTICE RELATING TO MIGRANTS MORE UNIFORM AND SPEEDIER? IF SO, DESCRIBE IN DETAIL BY STATE SO USING. IF NOT, WHY NOT?

Answer:

No standard questionnaire has been developed because no single standard would satisfy the requirements of the several States. The local jurisdictions of the various States are autonomous with respect to certification and issuance procedures as long as they meet the minimum requirements of the State plan of operation.

4. (f) HAS THE DEPARTMENT EVER RECOMMENDED THAT COUNTY WELFARE OFFICE PERSONNEL LOCATED IN COUNTIES IMPACTED WITH MIGRANTS BE GIVEN SPECIAL TRAINING TO DEAL WITH MIGRANTS? HAS IT DEVELOPED ANY TRAINING PROGRAMS TO AID LOCAL WELFARE OFFICIALS IN DEALING WITH THE PROBLEMS OF CERTIFYING AND PROVIDING FOOD STAMPS TO MIGRANTS?

Answer:

No.

5. REJECTIONS AND DECERTIFICATIONS (INCLUDING ONES BASED ON FAILURE TO REGULARLY PARTICIPATE IN THE FOOD STAMP PROGRAM) FOR FOOD STAMP AND COMMODITY RECIPIENTS.

5. (a) HOW MANY PERSONS IN THE AFOREMENTIONED YEARS AND STATES HAVE BEEN REJECTED OR DECERTIFIED? ARE TABLES PROVIDING A DETAILED BREAKDOWN OF THE FOREGOING AVAILABLE? HOW MANY OF THESE PERSONS IN EACH CATEGORY WERE MIGRANTS?

The Department of Agriculture does not require States and localities to report to it on the results of the millions of certification actions undertaken each year in dealing with hundreds of thousands of applicant households.

FNS' monitoring activities and the audit activities of the Office of the Inspector General do include appropriate reviews of the certification actions of certifying agencies to insure that they are in conformance with Federal regulations and State Plans of Operation.

5. (b) WERE ANY DECERTIFIED OR REJECTED PARTICIPANTS AFFORDED A GRIEVANCE PROCEDURE AND/OR HEARING? IF SO, WERE SUCH GRIEVANCE PROCEDURES OR HEARINGS BEFORE OR AFTER THE ADVERSE ACTION?

See answer to questions 4. (b) and 5. (a).

5. (c) ARE THERE STATISTICS FOR THE SAME YEARS AS TO THE NUMBER OF FOOD STAMP PARTICIPANTS DECERTIFIED FOR LACK OF REGULAR PARTICIPATION? HOW MANY AND IN WHICH STATES WERE MORE THAN .05% OF THOSE PERSONS MIGRANTS?

As indicated in 5 (a), it would be an impossible reporting burden to require the States to report on the details of millions of certification actions carried out each year. However, the requirements for regular participation are of the least significance for categories such as migrant workers and others with seasonal or other short-term need for assistance. Typically, when the migrant family is following the crops, it will have intermittent eligibility--generally in those periods of relatively short-term unemployment or underemployment. In the case of families that move on and off the program with shifting earnings and employment--and especially as such families travel from State to State--the regular participation policy has little applicability.

6. MISCELLANEOUS QUESTIONS

6. (a) PLEASE DETAIL MANDATORY AND PERMISSIVE REQUIREMENTS AND PRACTICES RELATING TO HARDSHIP PROVISIONS APPLICABLE TO MIGRANTS (e.g., EXCESSIVE COSTS FOR RENT, TRANSPORTATION, MEDICAL CARE, ETC.,) AND PROCEDURES FOR EMERGENCY CERTIFICATION FOR FOOD STAMPS OR COMMODITIES.

6. (b) IF BOTH PROVISIONS ARE NOT INCLUDED IN ALL STATE PLANS OR IF THE PROVISIONS OR PRACTICES THEREUNDER VARY, PLEASE EXPLAIN IN DETAIL?

Attached (see 6(b)1 and 6(b) 2) are listings, by Regions, of State requirements on hardship and emergency certification provisions.

6. (c) ARE SPECIAL ARRANGEMENTS MADE FOR THE SALE OF FOOD STAMP COUPONS OR FOR THE DISTRIBUTION OF COMMODITIES TO MEET THE PROBLEMS OF MIGRANTS WHOSE HOURS OF WORK, REGULARITY OF EMPLOYMENT, AND OTHER BASIC NEEDS VARY FROM DAY TO DAY AND MONTH TO MONTH? IF NOT, WHY NOT?

Refer to 4. (a).

6. (d) WHY HAS THE DEPARTMENT NOT ISSUED FORMAL INSTRUCTIONS AS TO REPUDIATING THE RESIDENCE REQUIREMENTS FOR PARTICIPATION IN FOOD STAMP PROGRAMS AS IT RECENTLY DID FOR THE COMMODITY DISTRIBUTION PROGRAM (FNS(CD) INSTRUCTION 707-9)? WHY WAS THE COMMODITY INSTRUCTION DELAYED FOR ALMOST A YEAR AFTER THE SUPREME COURT'S DISAVOWAL OF RESIDENCY AS A CONDITION FOR ELIGIBILITY FOR WELFARE BENEFITS? WHAT IS THE ANTICIPATED IMPACT OF THE BROADENING OF THE ELIGIBILITY REQUIREMENTS FOR PARTICIPATION IN THE COMMODITIES DISTRIBUTION PROGRAM? WILL IT HAVE ANY IMPACT ON THE OPERATION OF THE FOOD STAMP PROGRAM? UPON WHAT BASIS DO YOU RELY IN FORECASTING SUCH AN IMPACT?

Benefiting from the experience of the Commodity Distribution Program, when the Food Stamp Act was initiated in 1964, durational residence requirements were not included in the legislation. Therefore, there is no need for their deletion.

The Supreme Court prohibited durational residence as a condition of eligibility for federally-aided public assistance programs. Steps were subsequently taken by FNS to use that decision as the basis for amending the Commodity Distribution Regulation to comply with the Court's decision, because food assistance eligibility is based on State welfare requirements. Bureau of the Budget Circular A-85 requires a 45- to 60-day notice to public interest groups representing State and local governments before approval and publication of regulation changes. The Department received clearance on the proposed regulation prohibiting citizenship and durational residence requirements through the Advisory Commission on Intergovernmental Relations on September 24, 1969.

The Regulation was approved on November 21, 1969, and published in the Federal Register on November 26, 1969. After interdepartmental clearance (including several revisions), FNS(CD) Instruction 707-9 was distributed to State program agencies in January 1970.

The favorable impact on participation resulting from prohibiting citizenship and durational residence requirements can be expected since it removes a previous barrier to participation.

Durational residence requirements were never included in the Food Stamp Program; therefore, it will not be affected by the change.

MICHIGAN MIGRANT MINISTRY, INC.
Lansing, Mich., August 1, 1969.

Mr. BOREN CHERTKOV,
Office of Senator Walter F. Mondale,
Senate Office Building,
Washington, D.C.

DEAR MR. CHERTKOV: Barry Lando of the Chicago Office of CBS News informed me of your interest in the abuse of winos on the Michigan farm labor scene.

The fault is mine that you did not hear of this case study directly instead of through the news media. The New York office of the National Council of Churches Department of Justice had instructed me to send copies of the case study to Senator Mondale, and I had neglected to do so.

Enclosed with this you will find a case study on Wardell Williams, and the minutes of a meeting in which the officials of Van Buren County, Michigan attempted to deal with a similar situation in two camps in their own county.

If you should desire some contact from Michigan for testimony concerning the migrant farm labor scene, I would be happy to supply you with names.

Very truly yours,

WILLIAM G. BENALLACK,
State Director.

Enclosures.

WARDELL WILLIAMS, MIGRANT CREW LEADER

September 8, 1968.—Five Indian men and one Negro man left the Charles Schwynn farm labor camp at 13543 Statler Road, two miles east of Blissfield in Lenawee County. They appeared at the Mennonite Church in Adrian seeking food, and were fed.

September 9, 1968.—A man was reported having been seen lying on the west side of the Detroit-Toledo, and Ironwood Railroad off Stadler Road. Troopers from Blissfield State Police post picked up the man and returned him to the Schwynn camp, over his objections. The man was extremely dirty, apparently suffering from a bowel disorder. His name was Steve Thomas Lahetta, white, male, 5′7″, 145 pounds, whose last address was given as 1417 W. Madison St., Chicago, Illinois. The crew leader, Wardell Williams, said that he would clean up Mr. Lahetta and feed him.

At this time Lahetta told the troopers that he had told Mr. Williams that he was sick, Mr. Wiliams responded by telling him to leave the camp. When the troopers contacted Mr. Williams in the camp, he was advised to contact the County Health Department if Mr. Lahetta remained sick.

September 10, 1968.—Michigan Migrant Ministry office requested the Michigan Health Department officials to re-check the Charles Schwynn camp. By September 11, this was accomplished by Jerry Doan who is responsible for the Lenawee County area from Saginaw. On the evening of the 10th, the Mennonite pastor, Rev. Virgil Oyer, of Adrian, called the Director of Michigan Migrant Ministry to ask guidance for one of the six persons who had left the Schwynn camp on the 8th of September. Edgar Cardinal Broussard, an Indian from Louisiana, was still in Adrian after the other five of his group had left to return to Chicago. He was seeking food and a place to sleep, and indicated a willingness to talk to anyone who might like to hear his story about his relationship with Mr. Wardell Williams.

September 11, 1968—A meeting was called for the First Presbyterian Church in Adrian to review the story of Mr. Broussard. Those present were: Sigmund Wojtysiak, Chief of the Wage and Hour Division of the Bureau of Safety and Regulation, Michigan Department of Labor, Mrs. Elsie Thielander, Public Health Nurse, Lenawee County Department of Health, Mr. Carl Hammerstrom, Farm Labor Placement Services of the Michigan Employment Security Commission Office in Adrian, Mr. Jerry Doane of the Michigan Department of Health Office in Saginaw, Rev. Virgil Oyer, co-chairman of the Lenawee County Migrant Ministry Committee, Rev. William Winch, pastor of the church hosting the meeting. Mr. Broussard was questioned concerning his experience with Mr. Williams and his complaint concerning the wages he did not receive. He was permitted time to tell his story as he saw it from the time that he was picked up in Chicago until he left the camp on Stadler Road. Mr. Broussard said that a young policeman in the 900 block of W. Madison Street in Chicago approached him with the remark, "I got just the thing for you." He was taken to the bus of Wardell Williams and climbed aboard with the understanding that there would be adequate pay for as much work as he wanted to do. This was Saturday afternoon. Mr. Broussard said that the policeman received $1.50 for each worker he recruited. He did not give the source for this information. Mr. Williams held the bus until it was filled. As soon as the bus pulled away from Chicago cases of wine were opened and distributed among the workers. As far as Mr. Broussard knew the bus did not stop between Chicago and Blissfield, Michigan. When it did finally stop it was at the place of work and not at a migrant camp. They were put immediately to work. It was Sunday morning.

They were to be paid 16¢ for each hamper picked. Mr. Broussard said that he picked a total of 274 hampers during his week of work for Mr. Williams (a very low number). At 16¢ per hamper this is a total of $44.04 for the week. Mr. Broussard said that there were no tickets given to be used as a record for the number of hampers picked, the record was chalked on a blackboard each day and erased at the end of the day. At the end of the week Mr. Broussard expected to receive $44.00 from the crew leader and was told that he owed $5.00 to the crew leader and would have to remain on to pay off that amount. Of the 16¢ promised for the hamper of tomatoes, the group was informed at the first paying time that 2¢ would be held back until the crop was harvested.

The workers were charged $2.00 per day for their room and $1.00 for each meal. Sometimes the meals were served while all the men were sleeping before daylight and not permitted to eat after they had dressed. There was 40¢ charged for each package of tobacco supplied to the workers, $3.00 for each ½ fifth of wine, and there was a woman available for $7.00. No money changed hands in these transactions, it was kept as a record in the crew leaders book. Of the six workers who were with Mr. Broussard, from Chicago, only one, a man by the name of Gwinn from Wisconsin, received $8.00.

Mr. Broussard spoke of one man at the camp who had been kicked out of the barracks to sleep on the floor of the barn because he had the runs.

In the sleeping rooms provided there were 4 or 6 men in a room without blankets or pillows. Mattresses were moved from other beds to be used for covers and sometimes the men slept together to keep warm.

Mr. Broussard was sustained in his stay in Adrian for nearly a week by the Lenawee County Department of Social Services. Intake worker, Miss Yvonne Whipple, served in a case work liaison with Mr. Broussard. Miss Whipple was able to talk with someone at the home of Mr. Broussard's son at the telephone number which he provided. She asked for money for his transportation back to Chicago, this was not received. Miss Whipple said that most of the farm workers with whom she has to deal during the summer come from this particular crew. The story which Mr. Broussard gave, though far-fetched, was not unusual. The pay pattern with this crew seems to be normal. That is, workers arrive at the time of payment, but are told that they owe the crew leader money for services he has given them. Many spoke also of being slapped across the back or neck and told to work faster. All spoke of being picked up in downtown Chicago by Wardell Williams and brought to the Schwynn farm. Mr. Broussard also told Miss Whipple about a man who was being kept in the barn by Mr. Williams because he was too dirty to be allowed in the housing provided at the camp.

September 17, 1968.—Rev. Virgil Oyer was at the Mercury garage in Blissfield where a drunken man was waiting for the Blissfield police to pick him up. When he tried to verify his identity to the police, he could not find a Social Security Card which he said he had had when he last looked. The Blissfield policeman who serviced the call told Mr. Oyer that it was not unusual to have this kind of difficulty with the crew under Mr. Williams' leadership. That Mr. Williams frequently came looking for his men in Blissfield because he could not keep them at the camp. The man did not want to be returned to the Schwynn camp for fear of being beaten.

September 17, 1968.—Wardell Williams called Mr. Carl Hammerstrom at the

Michigan Employment Security Commission to ask for guidance concerning a worker he did not know what to do with. The worker was very sick at that point, Mr. Hamerstrom called the County Health Department.

September 19, 1968.—County Health officials were again asked to check the camp. Advised Mr. Williams to pick up Lahetta and to give him proper care. Mr. Williams agreed to do this, but asked the police to call an ambulance for him. Because of the financial implications in such action, they reminded Mr. Williams of his responsibility. Mr. Williams agreed to bring Mr. Lahetta to the hospital as soon as it stopped raining. He wanted to bring the man in the back of a pick-up truck instead of his sedan.

Mr. Lahetta was admitted to the Adrian Hospital and examined by Dr. Leonardo Baydon of Adrian. It was his opinion at that time that the condition of Mr. Lahetta was terminal. Subsequently the County coroner, Mr. Edward Braun, advised the Michigan State Police that the death was caused by amoebic dysentery and peritonitis. There was no evidence of foul play involved. It was reported by those who attended Mr. Lahetta in the hospital that he was so dirty that he appeared to be a negro man when admitted, but it became apparent that he was white after he had been bathed in oil a number of times. The state of his bodily deterioration was so advanced that there were maggots, or what appeared to be maggots, crawling out of his rectum.

A brother of Mr. Lahetta was contacted in Ohio. When inquiry was made into funeral expenses it was discovered that there was no Social Security card in his possession. The brother from Ohio indicated that a short time before he had been carrying a Social Security card and was eligible for benefits.

Mr. Carl Hammerstrom of the Michigan Employment Security Commission indicates that Wardell Williams is registered as a crew leader under the Crew Leader Registration Act of the Federal Government. Mr. Hammerstrom felt that the all-male crew and its confinement to a camp has value for a local community. Feeling that prostitution is common among farm workers under any conditions because the workers want it, it is better that it be kept in the camp than that workers come seeking such services in Adrian. He also pointed out that the workers want liquor and wine and if it were not provided illegally in camp they would only come to a town drinking place to acquire it and this would require more police to care for the problem and more taxes. He agreed that the wages were low but this is necessary in order to provide the cheap food that we now have on our grocery shelves.

News Articles that appeared in *The Globe and Mail*, Saturday, February 22, 1966 "ADMITTED KILLER 'TOO VALUABLE' TO SERVE ORDINARY PRISON TERM" Immokalee, Fla. (AP)—Wardell Williams is an admitted killer too valuable to send to prison.

Circuit Judge Harold Smith said 100 farm workers would be unable to earn a living if the farm labor contractor were taken out of circulation permanently.

He sentenced Williams to 20 years' probation and ordered him to spend two months in Collier County Jail each year until 1988. He must report each July 1 and spend the non-harvest months of July and August behind bars.

Williams pleaded guilty to manslaughter in the shooting of his common-law wife, Josephine Crawford, 35, on Dec. 5, 1967. He said they argued and claimed the killing was accidental.

"He's an employer of people," Judge Smith said yesterday. "When farmers need fruit-pickers or other workers, they deal through him. To put him away would be putting many people out of work."

Defense lawyer Jerome Pratt said Williams' payroll probably was between $400,000 and $500,000 a year. He hauls his crew by bus and truck to the crops. Farmers pay Williams and he pays the pickers.

Most of his work is in this Southwest Florida fringe of the Everglades farm area which calls itself the "watermelon capital of the world." Cucumbers, bell peppers, tomatoes and oranges also are important cash crops here.

Mr. Pratt said he requested the unusual sentence: "In my opinion Wardell is more valuable to society with this type of sentence than he would be resting in State Prison with the taxpayers feeding him while these people have to find new jobs.

"He's a good guy. For eight years he's kept them fed. He keeps them clothed. He keeps them working. He takes care of them."

Judge Smith said it was Williams' first felony conviction. "He'll serve 40 months this way and, under our present parole laws, he'll probably do more time than if I'd given him the maximum of 20 years in prison," he said.

Participants:

Ray Barrett—Assistant Prosecuting Attorney.
Sgt. Johnson—Michigan State Police, Paw Paw post.
Sgt. Foster—Michigan State Police, South Haven Post.
Robert Kaukola—Michigan Dept. of Health, Region I.
Norman Papsdorph—Michigan Dept. of Health, State Director, Sanitation.
Dale Hough—Michigan Employment Security Comm, St. Joseph office.
Richard Mock—U.S. Dept. of Labor, Farm Placement Service, Chicago office.
Wayne Wismer—U.S. Dept. of Labor, Farm Placement Service, Cleveland office.
Richard Stump—Sheriff, Van Buren County.
David Moore—Michigan Migrant Ministry.
Walter Winters—Salvation Army, 91 Hinkley St., Benton Harbor.
William Benallack—Michigan Migrant Ministry, State Director.

Before entering the place of meeting at Galati's Restaurant, Major Walter Winters of the Salvation Army, spoke about a number of men who run off from all-male crews to his agency for temporary shelter and food on their way back to Chicago. He said they had described to him most of what was written in the Wardell Williams case study. He indicated a willingness to cooperate in any way with the law enforcement or other agencies in the county in gaining access to this problem.

After the conversation began around the table inside it was apparent that in Van Buren County the all-male crew problems centered in two camps, both on the Duane Funk farm. One is operated by Vincent Drewry, and the other by Cotton Brewer.

It was pointed out that one of the problems in prosecution following violence in a farm labor camp is the length of time it takes to move a case through the criminal courts. Secretly the witnesses have disappeared and often the victim himself has left the county and the state. One case pending at the time of the conversation involved a man who is cut up badly and in the hospital. Sgt. Johnson indicated that it will be difficult to keep him around long enough to get the case into court and gain the use of his testimony.

Dick Mock explained some of the difficulties in the enforcement of the Crew Leader Registration Act. The Act only applies to those labor contractors who recruit 10 or more farm workers, move them across state lines for a fee. Since the implementation of the Act, there have been only 2 convictions, both of which resulted in $100 fines.

It was suggested that one avenue of approach in Van Buren County would be through the cooperation of all of the agencies involved in services to farm labor camps. First, there is a need for an awareness of the kinds of problems which are peculiar to the all-male labor camps, and secondly, an opportunity for sharing information.

The U.S. Department of Labor informed the group that a new man has been established in Napoleon, Ohio to service these complaints. He is available for investigation in local situations of this sort.

It was also suggested that a man be put into the system in Chicago or in Van Buren County to gather evidence. He should be a qualified farm worker and able to associate freely with the men in wino crews, and should be well trained in gathering evidence.

Wayne Wismer pointed out that the Crew Registration Act required that the crew leader maintain a detailed record of all financial transactions within his crew and that each worker be given a detailed statement of deductions from his wages.

Sgt. Johnston was asked to initiate an inquiry through the Michigan State Police office in East Lansing to the Chicago police concerning the recruitment of farm laborers on West Madison Street by local policemen for the crew leaders who bring their buses to that area.

Another suggestion was to raise these questions publicly to rouse public indignation against a farmer who would use this kind of labor. Some around the table felt that such ostracism would have little value since such persons frequently are already ostracized by their farmer neighbors.

An aside which involved a review of a case now pending. In a camp of Cotton Brewer a man was stabbed on the 31st of May. He has told the police that he pays $17.50 a week for room and board to Mr. Brewer, that he was recruited from Chicago on the 14th of January. The sheriff felt rather firmly that the man was stabbed by Mr. Brewer, but feels that he will be unable to demonstrate this in court.

SUMMARY

1. All agencies in Van Buren County be aware of the peculiarities of the all-male farm labor camp and be willing to exchange information which they uncover.

2. Put a worker into the all-male labor camp stream with the ability to get other evidence for a court case.

3. An inquiry be initiated by the Michigan State Police of police practices in Chicago and the recruitment of farm laborers for crew leaders on West Madison St.

4. Pressure be put on the farmer who hires this kind of crew through public opinion and official inquiries.

5. It was requested that the Chicago office be notified about all violations in Van Buren County whether they can be prosecuted or not.

6. Dale Hough was requested to keep a list of verbal complaints which come through his office and to share them with others who might be able to develop a pattern by such sharing.

7. It was recommended that information in Van Buren County be centralized and all other agencies be informed. Dale Hough was requested to fill this function.

Inquiry was made concerning the absence of Social Security cards on some of those who have been involved in difficulties in all-male camps. It was pointed out that a possible use of such cards would be a new identity for someone. Another is a new reporting number for a crew in order to conceal the movement of the crew. Yet another suggestion was some form of Internal Revenue Service evasion.

In one of the summaries Dale Hough said that it seems like every road leads us back to the river again. We all know what happens in such camps but how do you prove it?

CALIFORNIA RURAL LEGAL ASSISTANCE

PRESS RELEASE

July 27, 1970

Contact: James Lorenz
John Ladd
California Rural Legal
Assistance
1212 Market Street
San Francisco, California

Telephone: (415) 863-4911

FOR IMMEDIATE RELEASE

The United States Department of Agriculture was accused today of delivering huge agricultural subsidies to growers who regularly and flagrantly violate pure food laws. The charges are contained in a formal complaint filed today with the U.S.D.A. in Washington, D. C. by the Association of California Consumers and twelve farm workers.

According to the complaint, 30 California growers who received agricultural subsidies of $7,100,000 in 1969 were in regular and flagrant violation of the California Pure Food Laws and the California Field Sanitation Laws, as well as the Federal Pure Food and Drug Act. One alleged violator received $4,370,657 in agricultural subsidies in 1969; another alleged violator, $1,788,052 in 1969.

The complaint estimates that California growers who received over $25 million of agricultural subsidies in 1969 committed more than 120,000 violations of health laws in that year.

The petitioners are represented by California Rural Legal Assistance. Commenting on the petition, CRLA attorney Jim Lorenz said: "We are flabergasted as to how the Federal government can so lucratively reward persons who are in violation of the law. It is an interesting commentary on the present campaign for law and order. The Department of Agriculture continues to pay agricultural subsidies to growers producing food in flagrant violation of local pure food laws."

The complaint demands that the U.S.D.A. end all subsidization of growers violating the health laws. It also demands that the Federal government discontinue purchases or distribution of food which has, or may have become adulterated by reason of being grown in unsanitary conditions.

The Association of California Consumers entered the case in order to protect consumers throughout the country. Because the growers illegal failure to provide toilets frequently forces farm workers to urinate and defecate directly upon food crops, a potential danger to consumers is created. Sylvia Siegel, director of the Association of California Consumers, stated: "The government talks about law and order all the time, but they break the law themselves. Consumers have assumed that they are protected by the pure food laws. But now we find the government itself distributing adulterated foods to school children and giving huge subsidies to growers who send it into the supermarkets."

In addition to being cited for failing to protect the American consumer, the U.S.D.A. is itself accused in the complaint of violating two federal laws. The Federal Pure Food Act bars the U.S.D.A. from receiving or distributing adulterated food. The Federal Service Contracts Act of 1965 requires the U.S.D.A. to use cut off contracts with growers who are in violation of sanitation laws.

"It's time we take a close look at the Federal Agricultural Subsidy Program," Lorenz concluded. "Violation of the laws should not be rewarded by the Federal government."

JAMES D. LORENZ, JR.
JAMES SMITH
CARLOS YNOSTROZA
1212 Market Street
San Francisco, California 94102
Telephone: (415) 863-4911

Attorneys for Petitioners

UNITED STATES DEPARTMENT OF AGRICULTURE
WASHINGTON, D. C.

In re ASSOCIATION OF CALIFORNIA)
CONSUMERS; PAT FLORES, DIONICIO) NO.
VASQUEZ, MIGUEL CANAS, LUPE AVENA,)
APOLINAS MARIN, PAUL MARIN, GLORIA) PETITION FOR
MARIN, CONNIE MARIN, MARLO MARIN,) IMMEDIATE ACTION TO
MANUEL MARIN, JUAN ESPINOZA, RAY) CUT OFF AGRICULTURAL
F. LOPEZ, and All Farm Workers) SUBSIDIES TO GROWERS
Similarly Situated,) IN VIOLATION OF THE
) LAW
Petitioners.)
)

TO: The Honorable Clifford Hardin, Secretary, United States Department of Agriculture

This petition is filed pursuant to 42 U.S.C. §4321, *et seq*., 21 U.S.C. §§331, 342, 41 U.S.C. §351, *et seq*., and California Health and Safety Code §5474, *et seq*.

Petitioner Association of California Consumers is a private organization, duly organized under California law, and concerned with the protection of consumers. The remaining petitioners are farm workers, filing this action on behalf of themselves and all other farm workers similarly situated.

Numerous growers receiving agricultural subsidies from the U. S. Department of Agriculture are in continuing and flagrant violation of Federal and state health laws banning the shipment of unclean and adulterated food in interstate commerce. Thus, through its agricultural subsidy program, the Federal government is allowing, and even encouraging, the growth and shipment of adulterated food. This constitutes a flagrant disregard for law and order, a disregard which is subsidized and even encouraged by the Federal government. In addition, the U. S. Department of Agriculture, in providing agricultural subsidies to various farmers, is acting as a joint venturer with those farmers, and, consequently, is itself in the violation of Federal and state laws.

Petitioners request the Secretary of the U. S. Department of Agriculture to take immediate steps to stop these practices, including:

(a) the cut-off of all agricultural recipients now found to be in violation of Federal and state laws dealing with adulterated foods; and

(b) the promulgation of regulations to insure that, in the future, no agricultural subsidies will be paid to growers in violation of such laws.

I

From May 22 - May 29, 1969, the J. G. Boswell Company, of Fresno County, California, employed some 15 farm workers at Corcoran, California, without providing properly constructed toilets, or toilet paper, or handwashing facilities -- all in violation of the California Pure Food Act [California Health and Safety Code §26470], and the California Crop Growing and Harvesting Sanitation Act [Health and Safety Code §5474.20, et seq.].

In 1969, J. G. Boswell Company received $4,370,657 in agricultural subsidies from the Federal government.

These violations of the law by J. G. Boswell Company, a Federally-subsidized grower, were not isolated instances. Indeed, such violations have been flagrant and continual. Other violations of adulterated food provisions were observed from June 12 - June 26, 1969 in fields located at Highway 41 and Nevada Avenue in Stratford, California. Petitioners are informed and believe and on such information and belief allege that similar violations by

J. G. Boswell Company continued through 1969 and 1970, up to the date of this petition. (For a more detailed description of these violations, see investigative reports, marked Exhibit A, which are attached hereto and made a part herein.)

From June 20 - June 26, 1969, South Lake Farms, also of Fresno County, California, failed to provide toilets, handwashing and drinking facilities to farm workers employed in fields at Stratford, California. Petitioners are informed and believe and on such information and belief allege that similar violations by South Lake Farms occurred throughout 1969 and 1970, up to the dat of the filing of this petition. During 1969, South Lake Farms received from the Federal government agricultural subsidies of $1,788,052.

The above examples of violations of pure food laws by Federally-subsidized growers are merely symptomatic of wide spread failures prevalent in the California food industry. In 1969, investigators for petitioners surveyed the fields of 30 growers who were in continual violation of the California Health and Safety Code and who, as a group, received more than $7,100,00 in Federal agricultural subsidies.

In 1969 alone, there were more than 635,750 violations of California sanitation laws by California growers. (The extent an nature of these violations is detailed in the Complaint to the State Department of Public Health, marked Exhibit B, attached hereto and made a part hereof.) Petitioners are informed and believe and on such information and belief allege that approximately one-fifth of the growers responsible for these violations received agricultural subsidies from the Federal government totaling more than $25 million dollars in 1969. (Nationally, farmers received some $3.8 billion in agriculture subsidies in 1969, making this one of the largest benefit programs in the Federal budget.)

Petitioners are flabergasted as to how the Federal government can so lucratively reward persons in violation of the law. The continuing failure of the Department of Agriculture to stop agricultural subsidy payments to growers producing food in unsanitary conditions is an ironic footnote indeed to the present national campaign for law and order. This failure, which runs through the mammoth $3.8 billion agriculture subsidy program, amounts to a flagrant disregard of the public interest. If the Department of Agriculture were to require subsidy recipients to comply with the law, a powerful incentive would be created for food producers to provide sanitary conditions, and, petitioners submit, the violations of California's sanitation laws would be cut from 50 - 90% in a short period of time.

II

The provision of adequate sanitary facilities wherever foodstuffs are produced is not only a concern to agricultural workers, many of whom are now forced to work in unsanitary conditions. Clean and healthful foodstuffs are of primary importance to American consumers. California, the situs of more than 635,000 sanitation violations in 1969, is the largest agriculture producer of any state in the country, growing more than half of most of the country's fruits and vegetables.

Grave health problems are raised by these violations. When growers do not provide toilet and handwashing facilities, many farm workers are forced to urinate and defecate in fields where fresh produce is grown. The farm workers have little choice in the matter. They often work for long hours surrounded by acres of food crops, far from any house, gas station, or any area where they can safely relieve themselves. When, as a result, they are forced to relieve themselves in irrigation ditches or in the fields themselves, human urine and excrement may find its way on to food products by direct contact or through contact with the irrigation water, or by contact with the hands of the farm workers.

Because clean food is a national, as well as a state concern, the Federal Pure Food and Drug Act prohibits the introduction into interstate commerce of any food which is prepared, packed or held under unsanitary conditions. 21 U.S.C. §§342, 331. The critical national interest protected by such restrictions, has been aptly described by the California Legislature, which has passed similar provisions:

> "The legislature finds and declares that the people of the State of California have a primary interest in the sanitary conditions under which food crops are grown and harvested for human consumption and in the health and related sanitary conditions under which the workers are employed in the growing and harvesting of food crops." [California Health and Safety Code §5474.20.]

Federal and state restrictions are not now being adequately enforced by the Federal Department of Health, Education and Welfare, by the California State Department of Public Health, and by California county health authorities. The reasons for this lack of enforcement are clearly set forth in the Complaint to the California State Department of Public Health, marked Exhibit B and attached hereto: These agencies just do not have enough staff to enforce the relevant health regulations. Therefore, if the American consumer is to be protected from food being grown in unsanitary conditions, the U. S. Department of Agriculture must act.

III

The U.S.D.A. has a legal duty to act to insure that no agricultural subsidies will be paid to agricultural producers until adequate steps have been taken to insure that such producers are in compliance with health and safety laws, both at the Federal and state level. Moreover, in providing agricultural subsidies to growers who are in continual violation of health and safety laws, the U.S.D.A. is in violation of the law.

By providing supplementary payments for some crops, such as sugar, corn and rice, the U.S.D.A. stands as the mortgagee of the grower's crops, as well as a guaranteed purchaser if prices fall below support prices. For those crops where the U.S.D.A. pays farmers not to produce on certain portions of land (and the farmers are able to take the Federal payments and undertake production elsewhere), the U.S.D.A. stands as the rentor without possession of the lands in question. In enforcing prices which are set on certain subsidized crops, the U.S.D.A. also serves as an enforcement agent. Given these various roles which the U.S.D.A. plays, it is clear that where Federal subsidy programs are instituted, the U.S.D.A. is acting as a joint venturer with the farmer. As a joint venturer, intimately and continually involved in the production of agricultural foodstuffs, the U.S.D.A. is bound to comply with Federal and state sanitation requirements, or, at the very least, to insure that its co-joint venturer, the farmer, complies with such laws. The normal doctrines of vicarious liability should be even more applicable to the U.S.D.A. since the U.S.D.A., as a governmental agency, carries a higher responsibility to fully comply with the law than does a private person. 41 C.F.R. §1-12.103 provides, for example, that all Federal agencies should:

> "Cooperate, and require contractors to cooperate, to the fullest extent possible, with Federal and state agencies responsible for enforcing labor requirements to such matters as safety, health, and sanitation...."

IV

The National Environmental Policy Act of 1969, 42 U.S.C. §§4321, et seq., also requires the U.S.D.A. to cease the subsidization and encouragement of growers responsible for unsanitary conditions,

Recognizing the right of each citizen to a healthful environment [41 U.S.C. §4331c], the Act provides that the government should "promote efforts which will prevent or eliminate damage to the environment and biosphere and stimulate the health and welfare of man...." Violation of field sanitation laws is clearly contrary to these policies because it directly endangers the most important element of the biosphere -- men themselves. Since field sanitation violations thus contravene environmental policies, the U.S.D.A. is required to interpret its policies and regulations so as to eliminate, to the fullest extent possible, such endangerment of health. 42 U.S.C. §4332 explicitly requires this:

> "The Congress authorizes and directs that, to the fullest extent possible: (1) the policies, regulations, and public laws of the United States shall be interpreted and administered in accordance with the policies set forth in this chapter."

The U.S.D.A. is further bound by 42 U.S.C. §4333:

> "All agencies of the Federal government shall review present statutory authority, administrative regulations, and current policies and procedures for the purpose of determining whether there are any deficiencies or inconsistencies therein which prevent full compliance with the purposes and provisions of this chapter...."

V

In delivering mammoth subsidies to growers in violation of sanitation laws, the U.S.D.A. is also in violation of the Federal Pure Food and Drug Act. 21 U.S.C. §331 of the Act provides, in part:

> "The following acts and the causing thereof are prohibited: (a) the introduction of delivery for introduction into interstate commerce of any food...that is adulterated... (c) the receipt in interstate commerce of any food that is adulterated...."

And, 21 U.S.C. §342 provides, in part:

> "A food shall be deemed to be adulterated-... (a)(4) if it has been prepared, packed or held under unsanitary conditions whereby it may have become contaminated with filth, or whereby it may have been rendered injurious to health...."

The granting of assistance to growers who violate sanitation laws is by itself a causing of the introduction of adulterated food into interstate commerce, and is, therefore a violation by U.S.D.A. of the above-cited provisions. These violations become even more dramatic when various types of Federal assistance to growers are examined.

First, under several U.S.D.A. programs, crops are purchased outright from growers and distributed by the Federal government, notably to school children under the "School Lunch Program" and to the poor under the "Commodity Distribution Program," U.S.D.A. also accepts repayment of "commodity credit" through the direct transfer of food crops from the grower to the U.S.D.A.'s Commodity Credit Corporation, with similar means of disposition to children and to the poor. Both these U.S.D.A. programs are clear instances of a prohibited "receipt into interstate commerce" of adulterated food where the subsidized growers have failed to comply with field sanitation laws.

Second of all, where U.S.D.A. gives credit under the price support program of the Commodity Credit Corporation, it is also in violation of the Federal Pure Food and Drug Act whenever the growers are in violation of field sanitation laws. The fatal "receipt into interstate commerce" arises from the mere granting of the commodity credit loan, since such a loan is essentially the granting to the grower of an option to sell his product to the United States at a predetermined price.1/

1/ This option to sell arises because the loan granted is a non-recourse loan and the grower will naturally repay the loan with a crop whenever its market price falls below the amount of the loan.

VI

By subsidizing growers in violation of sanitation laws, the U.S.D.A. is also in violation of the Service Contracts Act of 1965. Section 2 of that Act [41 U.S.C. §351] provides, in part:

> "(a) Every contract entered into by the United States...in excess of $2500...the principle purpose of which is to furnish services in the United States through the use of service employees, as defined herein, shall contain...(3) a provision that no part of the services covered by this chapter will be performed...under working conditions...which are unsanitary or hazardous or dangerous to the health and safety of service employees engaged to furnish the services."

41 U.S.C. §357(b) defines "service employee" as including:

> "Any person engaged...in unskilled, semi-skilled, or skilled manual labor occupations... and shall include such persons regardless of any contractual relationship that may be alleged to exist between the contractor or subcontractor and such person."

Violation of the contractual provision required in §351 allows the United States to cancel the contract so violated and to disqualify the violating contractor from securing any other Federal contracts.

The legislative history of, and the administrative provisions construing, the Service Contract Act of 1965 make it evident that many U.S.D.A.-grower contracts are in fact, "service contracts." See Senate Report No. 798 on the Service Contract Act of 1965, 1965 [2] U. S. Code, Cong. Admin. News 3737 (89th Cong. 1st Sess. 1965). Indeed, the U.S.D.A.-grower contracts may be defined as "service contracts" even though the Federal government is said to be making a certain investment in capital and land in addition to labor. As long as the consideration bargained for by the government is a "service," rather than "goods," or "construction," the amount of labor and non-labor costs in the provision of services is irrelevant. See 29 C.F.R. §4.131a.

/// ///

In many of the agricultural subsidies extended by the Federal government to growers, the services bargained for by the U.S.D.A. are actions which help conserve and maintain the nation's valuable natural resources. Under the Agricultural Conservation Program, the grower agrees to perform work on his land to protect against wind and water erosion, to improve the productivity of the land, and to protect and improve the source, flow and use of water for agricultural purposes. Under the Production Adjustment Act, payments are made to growers who agree to provide the service of limiting acreage or production. In return, growers receive Federal payments. Under the Emergency Conservation Measures Program, growers in California contract with the U.S.D.A. to provide "emergency control measures to rehabilitate farm land damaged by the 1968-1969 winter floods." (Under this Program, contracts were let to Kern, Kings and Madera Counties -- the situs of the sanitation violations uncovered by petitioners -- in amounts exceeding $260,000 in 1969.)

To petitioners' knowledge, the U.S.D.A. has supplied at least $97 million dollars worth of contracts requring California growers to provide services for the United States Government. However, to the best of petitioners' knowledge, none of these contracts contain the Fair Labor Standard provisions required by the Service Contracts Act of 1965. It would be a simple matter indeed for the U.S.D.A. to require all the subsidy-applicants to present evidence of compliance with sanitation laws before agricultural subsidies are paid to such applicants. Such measures are already taken by the U. S. Department of Labor and by many other Federal agencies, pursuant to the provisions of the Walsh-Healey Act, 41 U.S.C. §§35-45.

WHEREFORE, petitioners pray for the following relief:

1. That the U. S. Department of Agriculture cut off all agricultural subsidies to growers in the United States now

found to be in violation of Federal and state food sanitation requirements; and to this end, that the U.S.D.A. immediately undertake investigations to determine whether present subsidy recipients are in compliance with said laws; and further, that the U.S.D.A. stand ready to receive, and act upon, any complaint of sanitation requirements involving subsidy recipients.

2. That the U.S.D.A. require that before any more contracts for agricultural subsidies be entered into with growers, that the grower-applicants be required to provide evidence of compliance with Federal and state sanitation requirements, including a signed affidavit, under penalty of perjury, setting forth the existence of such full compliance.

3. That the U.S.D.A. bring itself into compliance with the Service Contract Act of 1965 by inserting labor protection clauses into all covered contracts with growers.

4. That the U.S.D.A. publicly announce adoption of the policies and provisions, described above, and communicate such policies and provisions to all interested Federal, state and local health authorities concerned with the enforcement of food sanitation, including the U. S. Department of Health, Education and Welfare.

Dated: July 24, 1970.

Respectfully submitted,

JAMES D. LORENZ, JR.
JAMES SMITH
CARLOS YNOSTROZA

By /s/ James D. Lorenz, Jr.
James D. Lorenz, Jr.

Attorneys for Petitioners

EXHIBIT A

GROWERS RECEIVING AGRICULTURAL SUBSIDIES WHO VIOLATE FIELD SANITATION LAWS

West Lake Farms	Subsidies Receivec
	$697,360 (1969) $341,797 (1968) $622,569 (1966)

1

Violations:

Date: April 7 - 11, 1969,

Number of victims: 13

Violations: No toilet, no handwashing facilities, no drinking water. (I.W.C. 14-68)

Approxoimate location: 22nd Ave. & Nevada Ave.,
Stratford, California

Farm Labor Contractor: Mel Mendez

2

Violations:

Date: June 12 - June 26, 1969

Number of victims: 30

Violations: No toilet, no handwashing facilities, no drinking water. (I.W.C. 14-68)

Approximately location: Highway 41 & Nevada Ave.,
Stratford, California

Farm Labor Contractor: Martin Murillo.

3

Violations:

Date: June 26, 1969.

Number of victims: 6

Violations: Workers fired for refusing to work overtime without pay. (Labor Code §1695[4])

Approximate location: Highway 41 & Nevada Ave., Stratford, California.

Farm Labor Contractor: Martin Murillo.

4

Violations:

Date: July 28, 1969.

Number of victims: 17

Violations: Toilet dirty, no toilet tissue, no handwashing facilities. (I.W.C. 14-68)

Approximate location: Southeast section 24 & northeast section 25, Stratford, California.

Farm Labor Contractor: Martin Murillo.

5

Violations:

Date: July 28, 1969.

Number of victims: 6

Violations: No toilets, no handwashing facilities. (I.W.C. 14-68)

Approximate location: East side of section 36, Stratford, California.

Farm Labor Contractor: Martin Murillo.

6

Violations:

Date: July 29, 1969.

Number of victims: 3

Violations: No toilets, no handwashing facilities, no individual drinking cups (I.W.C. 14-68)

Approximate location: Stratford, California.

Farm Labor Contractor: Martin Murillo.

South Lake Farms	Subsidies Received
	$1,788,052 (1969) $1,177,320 (1968)

1

Violations:

Date: June 20 - June 26, 1969.

Number of victims: 6

Violations: No toilet, no handwashing facilities, no drinking water. (I.W.C. 14-68)

Approximate location: Stratford, California.

Farm Labor Contractor: Martin Murillo.

J. G. Boswell Co.	Subsidies Received
	$4,370,657 (1969) $3,010,042 (1968) $2,807,633 (1966)

1

Violations:

Date: July 18, 1969.

Number of victims: 20

Violations: No toilet, no handwashing facilities, no itemized wage statement. (I.W.C. 14-68)

Approximate location: Stratford, California.

Farm Labor Contractor: J. P. Martinez

2

Violations:

Date: May 22 - May 29, 1969.

Number of victims: 15

Violations: No handwashing facilities, improperly constructed toilet, no toilet tissue. (I.W.C. 14-68)

Approximate location: 10th Avenue, Corcoran, Calif.

Farm Labor Contractor: J. P. Martinez.

EXHIBIT B

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Attorneys for Petitioners

STATE BOARD OF PUBLIC HEALTH
STATE DEPARTMENT OF PUBLIC HEALTH
SACRAMENTO, CALIFORNIA

In re ASSOCIATION OF CALIFORNIA CONSUMERS, PAT FLORES, DIONICIO VASQUEZ, MIGUEL CANAS, LUPE AVENA, APOLINAS MARIN, PAUL MARIN, GLORIA MARIN, CONNIE MARIN, MARLO MARIN, MANUEL MARIN, JUAN ESPINOZA, RAY F. LOPEZ, and All Farm Workers Similarly Situated,

Petitioners.

NO.

REQUEST FOR IMMEDIATE
ACTION TO PROVIDE
SANITATION FACILITIES
IN FOOD PRODUCING
AGRICULTURAL FIELDS

TO: The Honorable Louis Saylor, Director, State Department of Public Health, the State Board of Public Health, and The Health Officer of Each County Growing Foodstuffs in the State of California

This petition is filed on behalf of California consumers and farm workers pursuant to Sections 102, 205, 208 and 26543 of the California Health and Safety Code and Section 11503 of the California Government Code. Petitioners are suffering daily from the consequences of ineffective enforcement of sanitation laws in food crop growing and harvesting. Those petitioners who are consumers are endangered by adulterated produce. Those petitioners who are farm workers are subject to contagious diseases and other health hazards as well as to humiliation and discomfort. Petitioners request the State Board of Public Health to schedule hearings within the next 30 days at which testimony shall be taken on the sanitation crisis, recommendations for law enforcement reform considered, and steps taken to carry out the Board's responsibility to enforce sanitation laws for petitioners' protection.

I

SOME FARMWORKERS DEFECATE AND URINATE IN FIELDS WHERE FRESH PRODUCE IS GROWN WHEN EMPLOYERS DO NOT PROVIDE TOILET FACILITIES.

Workers have no choice. They work long hours surrounded by acres of celery, lettuce, tomatoes, carrots or artichokes, far from any house, gas station or any area where crops are not growing. They cannot use the highway. There is no time to walk to a distant place because they work on a piece-rate and any time taken off is their own economic loss. If they use an irrigation ditch, crops become contaminated when irrigated. Some have refused to relieve themselves in the fields, but they become ill trying to control themselves for an entire 8 - 12 hour work day. Furthermore, employers have made it clear that the farm workers need no toilets; they are expected to use the surrounding area. These disturbing facts were gleaned from conversations with hundreds of farm laborers working in a variety of crops throughout California. The excerpts which follow are from their affidavits.

On Wednesday, October 8, 1969, Manuel Olivas and Henry Cantu watched a six-man crew pulling a carrot-picking machine through the fields of the Bob Sanders Carrot Company in Monterey County. The workers told Cantu and Olivas that they had been working since 6:30 a.m. without a toilet, drinking water or hand-washing facilities. The field was their restroom. The attached photograph (marked Exhibit 1) was made that morning. It shows a pile of fresh human feces and smeared toilet paper which lay in the line of carrots waiting to be picked by the machine.[1/]

On March 11, 1970, in Santa Maria, California, Israel Torres passed a field where eighteen workers were cutting and

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[1/] Letter from Dennis Powell to Director, Department of Agriculture, et al., October 24, 1969, verified by Manuel Olivas and Henry Cantu.

loading fresh broccoli into trailers. The employer was guilty of a misdemeanor in that he provided no toilet, no drinking water and no handwashing water. A worker was photographed from the road as he walked a short distance away from the crew and relieved himself on the broccoli. (See attached photographs, marked Exhibit 2.) He used a few leaves as toilet paper and resumed work.[2]

On October 8, 1969, in the King City area, employees of United Fruit were loading lettuce in Nunes Brothers Trucks. A toilet was in the general area, but it was a full thirty minutes walk from where the crew was working. One worker was observed urinating on the lettuce.[3]

A veteran farm worker, with 26 years experience in cultivating and harvesting grapes, peaches, plums and nectarines, recently reported that he has seen innumerable farm workers use the fields to relieve themselves when growers or contractors fail to furnish toilets for the workers to use. He, himself, has been forced to defecate in the fields.[4]

Employers are often insensitive to the danger to worker and the general public caused by their failure to provide sanitation facilities. When told that he was going to be reported to health officials for failing to provide workers with toilets and other facilities, Denny Hackett, foreman for S. R. Gerrard in the Santa Barbara area, shrugged, "Go ahead and turn in your report. I don't care. I know the people in the Health Department. The workers don't need the facilities. They can p--- and s--- in the fields."[5]

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[2] Declaration of Israel Torres, March 12, 1970.

[3] Dennis Powell letter, supra, p. 3.

[4] Affidavit of Macio Alonzo, March 20, 1970.

[5] Declaration of Israel Torres, March 13, 1970.

A nineteen-year old girl was working for labor contractor Jose H. Hernandez in Santa Maria. The employer provided no sanitation facilities at any time during the eight hour work day. She said: "...rather than relieving myself in front of my fellow workers, who were men and women, and rather than contaminate the sugar beet crop, I tried to control myself, but I became sick when I could no longer control myself. I had to leave my job and go home."[6/]

A Kern County woman developed pains in her side and lower abdomen because she refused to relieve herself in the fields "without the privacy of some type of toilet facility." She went with fellow workers to request toilets and other facilities from the boss, John J. Kovacevich, who responded by providing a gallon of drinking water for a few days.[7/]

A man working in the same county reported how humiliated and uncomfortable he felt when he had to use the fields of his employer, William Mosesian Corporation, as a toilet for two months when no toilet was provided. The employer finally provided a "toilet," but it was:

> "...nothing more than four wooden walls placed over a hole which had been dug in the ground. This facility was very dirty and was never cleaned to my knowledge. No toilet paper was ever provided.
>
> "...no handwashing facilities of any kind were provided for our use. As a result, we were unable to wash our hands after performing bodily functions.
>
> "...drinking water was provided; however, the water was often unclean. It appeared that the can containing the water had not been cleaned out for some time as there was considerable sediment, dirt and other materials at the bottom of the can."[8/]

[6/] Affidavit of Maria ______, (her surname is withheld to protect her from possible harm), August 11, 1969.

[7/] Affidavit of Maria R. Garcia, January 31, 1969.

[8/] Affidavit of Samuel Manriquez, February, 1969.

A Santa Maria worker was employed cutting broccoli. His employer also violated the law and provided no sanitation facilities for his workers. When the farm worker developed an infection on his buttocks, he was informed by his doctor that the infection had resulted from using broccoli leaves as toilet paper.[9]

II

THE FIELD SANITATION LAWS ARE ESTABLISHED TO PROTECT FARM WORKERS AND CONSUMERS.

Under California law, every producer of agricultural produce who hires farm workers must supply the workers with toilet facilities which are sanitary and accessible, with soap, water, and towels for handwashing, and drinking facilities designed to protect against the transfer of communicable diseases. These sanitation requirements are set forth in the California Health and Safety Code, the Labor Code, in regulations promulgated by the Industrial Welfare Commission relating to the protection of women and children, and in various other administrative regulations prepared by the State Department of Public Health and the Labor Commissioner.[10]

The purpose of the requirements is clear: not only are they supposed to protect the health of farm workers and to provide them with barely decent working conditions, they are also to protect the consumer from purchasing foodstuffs contaminated with human excretia and filth. As was noted at a meeting of State officials called by the Department of Public Health in 1959:

> "1) Adulteration or contamination of the... [crops] itself occurs by direct deposit of urine or feces or handling with contaminated hands or gloves.

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[9] Single page declaration of Israel Torres, March 13, 1970

[10] See, e.g., Health and Safety Code, §5474.20, *et seq.*, §26450, *et seq.*, §28280, *et seq.*, Labor Code §1171, *et seq.*, 17 Calif. Admin. Code §8000, *et seq.*, 8 CAC §11110, *et seq.*

> "2) Drinking water is endangered by urine and defecation in the irrigation ditches. The worker and other segments of the rural public are exposed to this risk.
>
> "3) Occupational risk to the workers themselves results from drinking contaminated water and from hand to mouth transmission of intestinal organisms.
>
> "4) Worldwide experience has shown that the application of human feces to land in the agricultural food operation facilitates dissemination of infection to agriculturists themselves and to their families and to the general public by poor hygiene and poor food handling practices."[11]

And as was reiterated by California's Chief of Environmental Sanitation in November, 1959:

> "Aside from the sociological factors, which may prove in the long run to be very far-reaching, these conditions [lack of field sanitation facilities] create three public health problems.
>
> "The first is the risk of disease to the workers themselves. Studies made by our Department in migrant worker camps in the San Joaquin Valley in 1950-1952 indicated that rates of infection in the families of migrant workers with intestinal diseases were closely related to availability of water for personal hygiene. Where hands are not washed after visiting the toilet, infection spreads through a family by direct contact and by means of handling food. That this same principal holds in the harvesting fields is indicated by a relatively high incidence of illness and absenteeism due to diarrheal disturbances among field crop workers.
>
> "The second hazard is the risk to the entire population in a community where human excretia is deposited on the ground in proximity to places of residence, particularly in situations where flies are abundant.
>
> "The third public health problem looms largest of all in the eyes of the public and this is the threat of contamination of food with human excreta. The degree of risk of transmission of disease to a consumer of food by this means is difficult to establish by scientific means, although it is certain that some risk exists. But the overwhelming consideration is the repugnance of the idea of filth on food and the insistence of the American public on clean food whenever the issue

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[11] Minutes of Food Crop Harvesting Sanitation Meeting, Berkeley, California, June 16, 1959.

is raised."[12]

The principles of protection announced by the Department of Public Health have been approved by the California Legislature and made part of California law. In order to protect consumers of foodstuffs, the California Pure Food Act [Health and Safety Code §26470(4)], passed in 1939, says that food is "deemed to be adulterated...[i]f it has been produced, prepared, packed or held under unsanitary conditions whereby it may have become contaminated with filth, or whereby it may have been rendered diseased, unwholesome or injurious to health...." Section 26458 of the same Act provides that the term "contaminated with filth" applies "to any food not securely protected from dust, dirt, and as far as may be necessary by all reasonable means, from all foreign or injurious contaminations." As a further protection, a separate act, the Food Crop Growing and Harvesting Sanitation Act, passed in 1965 [Health and Safety Code §5474.20, _et seq._] states:

> "The Legislature finds and declares that the people of the State of California have a primary interest in the sanitary conditions under which food crops are grown and harvested for human consumption and in the health and related sanitary conditions under which the workers are employed in the growing and harvesting of food crops." [Health and Safety Code §5474.20.]

Not only growers, but also California's food retailers, wholesalers and canners must comply with the State's sanitation laws, since, when selling foods, they are giving the consumer an implied warranty that the food is free from any contamination and filth. To the extent that they sell food which is unclean or which was picked under unsanitary conditions, they are in violation of the California Pure Food Act, even though they had no knowledge that the grower who produced the food had failed to comply with field sanitation requirements. Section 26470 of the Act provides, in part:

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[12] Frank Stead, "Sanitation in the Harvesting of Field Crops," An Address Presented at the Annual Convention of the California Farm Bureau Federation (Vegetable Department), Statler-Hilton Hotel, Los Angeles, California, November 9, 1959.

> "A food shall be deemed to be adulterated:
>
> (1) If it bears or contains any poisonous or deleterious substance which may render it injurious to health...or...
>
> (4) If it has been produced, prepared, packed or held under unsanitary conditions whereby it may have become contaminated with filth, or whereby it may have been rendered diseased, unwholesome or injurious to health...." (Emphasis added.)

And Section 26510 provides:

> "The manufacture, production, preparation, compounding, packing, selling, offering for sale or keeping for sale...any article of food which is adulterated...is prohibited."

Significantly, a showing does not have to be made that the food being marketed is actually contaminated. Under Section 26470, a complaining party must only allege that the food was picked in unsanitary conditions which "may" have led to its contamination. As the California Attorney General has opined, the protection must be broad if the law is to be "an effective instrument." 23 Ops. Cal.Atty.Gen. 277, 280 (1954). In determining whether a food may pose a danger, it is much easier to look for toilets in a grower's field than it is to run a lengthy and costly laboratory test on his produce. A field check is also more effective, since it examines the source of the problem -- contamination in the field -- rather than its end result -- contamination of the foodstuff. By the time produce reaches a supermarket, it may be impossible to maintain adequate surveillance, let alone control. As the Attorney General notes, the provisions of Section 26470(4) may be "the only effective means of regulation provided." So, for example, if a raw fruit

> "is wholesome but is being dried under unsanitary conditions...[t]he fruit would be adulterated within the provisions

> of Section 26470(4). The situation may be that of a nearby privy, farm laborers walking to and fro by the fruit, and flies in abundance. It is in the public interest that such conditions may be abated." (Supra, pp. 280-281.)

Canners, wholesalers and food retailers are held to be under a duty of "ascertaining at...[their] peril" whether an article of food kept for sale conforms to the requirements of the Pure Food Act. People v. Schwartz, 28 Cal.App.2d Supp. 775, 70 P.2d 1017 (1937). For this reason, the standard purchase contract prepared by the Canners League of California makes provision for the grower to certify whether or not his crop is "adulterated" within the meaning of any law or governmental regulation.[13]

Aside from protecting the consumer, the California Pure Food Act and the Food Crop Growing and Harvesting Sanitation Act make good business sense for the State's agricultural industry which receives more than $2.644 billion from crop marketing and is, year in and out, the nation's number one farm state.[14]

In providing a means of quality control on foodstuffs, the pure food and field sanitation laws are intended to protect the competitive position of California agriculture in the nation's highly competitive foodstuff markets.

Without sanitation regulations, California foodstuffs might well bring a lower price on the nation's markets, and would certainly suffer stiffer competition from other states.

As foodstuffs are increasingly packaged in the fields where they are picked -- and this is a definite trend in California, with the introduction of highly sophisticated agricultural machinery -- the maintenance of field sanitation becomes more important. Now, more than ever before, food will be delivered to the consumer in the condition that it is picked in the field. Producing 99.6% of the nation's artichokes, 84.8% of its broccoli, and 58.6% of its celery -- to name just three crops, California agriculture can well be called the kitchen of the country -- and like a kitchen of a commercial restaurant, it is subject to similar stringent health regulations.

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[13] See, e.g., "Asparagus Contract, Form Prepared by Canners League of California with Revisions to January 10, 1968," Clause H.

[14] California State Department of Agriculture, California Agriculture, 1968, p. 4.

California agriculture must strictly comply with these sanitation requirements if the American consumer is to be protected.

III

SANITATION LAWS ARE FREQUENTLY VIOLATED.

Despite the stringent and comprehensive sanitation requirements, sanitary conditions are a fiction, not a reality, in many parts of this State, the fruit and vegetable bowl for the country. In 1968, three county health departments reported 3574 violations of sanitation laws, while admitting that, being greatly understaffed, they were able to survey only a small portion of the fields in their counties.[15]

In 1969, eleven health departments reported 14,898 violations or defects, including 2649 toilet violations, even though all of these counties were able to devote only a total of 18.69 man-years to inspecting field sanitation, labor camps, and other farm worker housing, or an average of 1.7 man-years per county.[16] Since Warren Holm, the sanitation specialist for the Farm Worker Health Project, estimates that these eleven departments were able to investigate from 10% to 50% of the fields in their counties, their reports of violations are likely to represent only one-tenth to one-half of the actual number of violations occurring in their counties in 1969. Thus, if all of the fields in their counties were surveyed, approximately 5,298 to 26,490 toilet violations would have been noted in the eleven counties. Since 14 of California's 22 largest agricultural counties did not make any reports about field sanitation, to say nothing of thirty-three California counties which did not report, the above estimate of toilet violations is less than half, and is more likely a third, of the actual number of sanitation violations occurring in the State's agricultural areas in 1969. Therefore, if the 1969 statistics of the Farm Worker Health Service are used as a basis for determination, we can conclude that there were at least 10,596 and probably more than 15,894 toilet violations in the State in 1969.

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[15] California Senate Committee on Public Health and Safety, Survey on Enforcement of Field Sanitation Laws and Regulations, April, 1969 (hereinafter sometimes referred to as the "State Senate Sanitation Report"), Table 1.

[16] Farm Worker Health Environmental Health Program, 1969 Report, (hereinafter sometimes referred to as the "Farm Worker Health Report"), pp. 81-82.

The toilet figures are only partly representative of the sanitation problem, of course. The 1969 Farm Worker Health Service statistics made no determination of how many employers failed to supply handwashing facilities and hygenic drinking cups to their workers. The 1968 State Senate Sanitation Report indicated that for most of the counties making full reports of sanitation violations, handwashing and drinking cup violations ran 1-1/2 to 4 times as high as toilet violations.[17/] Even if the latter kinds of violations were only twice as much, they would still have occurred at least 21,192 times in 1969, based on the minimum number of toilet violations committed in 1969. Thus, when the estimate of handwashing and drinking cup violations is added to the estimate of toilet violations, we can conclude that on at least 31,788 different occasions, California growers and labor contractors failed to comply with sanitation laws.

[17/] State Senate Sanitation Report, Table 1.

These figures do not come close to indicating the total number of violations which occurred in California. For every failure to provide a toilet or clean drinking cup, a number of workers are involved and affected. Assuming an average farm labor crew size of ten workers (which is a conservative estimate), ten violations should be recorded for each failure to comply with the law. Moreover, since a different violation occurs for each day that the grower fails to comply with the law, the duration of the lack of compliance must also be considered if a reasonably accurate estimate of violations is to be made. Assuming that the average time of non-compliance is two days, based upon estimates by sanitarians;[18/] the number of failures to comply should also be multiplied by two. So, multiplying the approximate instances of failure to comply in 1969 times 10 (the average number of persons affected), times 2 (the average duration of the failure to comply), we can conclude that in 1969 there were approximately 635,750 violations of the sanitation laws in California, the primary food producing State in the country.

Even these figures are underestimated. C. F. Bryson, Program Supervisor for the Bureau of Food and Drug Inspections, State Department of Public Health, indicated that sometimes county sanitarians do not enter fields to make a close inspection of sanitary facilities; they only observe the field from the road to determine whether a portable toilet has been placed there. Thus, they are in no position to determine whether the workers are provided with toilet paper, whether the toilet is overflowing or situated directly over crops which will be harvested, or whether farm workers are defecating in packing crates; nor do they know whether the workers are provided with soap and towels and clean drinking cups. What the sanitarians don't see, they

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[18/] This estimate was based upon sanitarians' answers to question 12 contained in the State Senate Sanitation Report, p. 19. Estimates ranged from 1 - 90 days.

can't report.

These figures should appear outlandish only to a person unfamiliar with California farm labor problems.

For example: In a three-month period during the fall and winter of 1967 and 1968, investigators connected with California Rural Legal Assistance made a survey of field sanitation conditions in Sutter and Yuba Counties, where plums, pears and apples are grown. Out of some 240 growers surveyed, 184 growers and labor contractors failed to comply with the law on 898 instances.[19] A minimum of 4,500 farm workers were affected, the total of separate legal violations would number more than 2,000,000. Reports, such as the following, were typical:

> "Angel Castillo. Labor Contractor. October 1967. 50 workers. Picking tomatoes. Drink from water can. Toilets: none. Handwashing: none."
>
> "Tom Frye - Grower. Grower. May & June, 1967. 35 workers. Hoe sugar beets. One cup for everyone. Water not clean. Toilets not private. Flies in toilet. Toilets stunk. Took about 35 minutes to get there. Handwashing: none."
>
> "Spoto Nursery. Grower. May-Dec., 1967. 4 workers. Nursery work. Pour [drinking] water into lid - no cup. Water not clean. Water not cold. Toilet dirty. No toilet paper. Black widow spiders. Handwashing: none."

In the spring of 1968, in Monterey County, CRLA investigators received reports of 1,869 violations from 107 farm workers. Monterey County is the country's primary producer of strawberries and artichokes and is one of the country's largest producers of lettuce.[20]

In the fall of 1968, in Kern and Southern Tulare Counties, where a large percentage of the State's table grapes are grown, 61 instances of multiple violations were reported to California Rural Legal Assistance investigators.[21/] Many of the delinquent growers reported continued to violate the law in 1969:

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[19] California Rural Legal Assistance, Report of Yuba-Sutter Sanitation Investigation, February, 1968.

[20] Petition for Writ of Mandate, Munoz v. State Department of Employment, Sacramento Superior Court, Civil No. 191631.

> "...In grape fields in Tulare County, north of Avenue 24 between Highway 99 and Road 144, apparently owned by Vignolo Farms, on February 4, at 10 a.m., and again at 2:45 p.m., there were 30 men and women engaged in pruning grapevines with no toilets or handwashing facilities.
>
> "...In the January 8th letter, reference was made to apparently illegal conditions in a grape field in Tulare County, east of Road 168 between Avenue 48 and Avenue 52, and apparently owned by Lamanuzzi & Pantaleo. Conditions appeared to be very much the same on February 4; at 11:30 a.m., and again at 3:10 p.m., there were about 60 men engaged in pruning grapevines with no toilets or handwashing facilities visible.
>
> "...In nearby fields also apparently owned by Lamanuzzi & Pantaleo, to the northwest of the intersection of Avenue 48 and Road 176, conditions were again much the same on February 11; at 1:10 p.m., and again at 3:25 p.m., a crew of about 30 men was observed pruning grapevines with no toilets or handwashing facilities available."

Citing at least twelve other instances where law violations were continuing over a three-month period, the McFarland report concluded:

> "It should be obvious that a mere warning to an employer concerning violations, followed by what amounts to a scheduled reinspection on the following day, will produce obedience to law on that day, or at most, for a couple of days thereafter. Witness the failure of the warning-giving program of the Division of Labor Law Enforcement to have any substantial lasting effect. If an employer can commit law violations with nothing more to fear than a 'warning,' if and when an enforcement agent drops by, and if obedience to law for a few days after that 'warning' will satisfy the enforcement agency, then California agricultural employers can continue to commit crime in the fields with impunity."[22/]

[21/] Letter from Paul Driscoll, Direct Attorney, California Rural Legal Assistance, McFarland office, to Director, Department of Industrial Relations, et al., February 25, 1969.

[22/] Driscoll letter, supra, p. 12.

As a result of CRLA investigations, publicity, lawsuits, pressures by the United Farmworkers Organizing Committee, and accelerated efforts by public agencies, sanitary facilities were introduced in a number of California counties in the spring of 1969. In the June issue of The California Farmer, the California Farm Bureau published a five-page supplement of field sanitation regulations and a list of all the State's portable toilet sellers and lessors, along with the warning that: "...[I]t behooves us as farmers to keep our skirts so clean that we are above reproach. We must work to see that...California Rural Legal Assistance, Inc., can find no instance in which we are not in complete compliance with every one of the laws and regulations pertaining to farm workers." Portable toilet lessors reported a two-fold increase in their business.

Despite such progress, and claims by some health officers that the problem was "solved," sanitation violations continued at a large enough rate in the summer and fall of 1969 to merit serious concern. Instead of an 80% to 90% violation rate -- as was the case in 1967 and 1968 -- approximately 50% to 70% of all growers were found to be out of compliance in the 1969 harvest.

In 65 inspections of fields in San Benito and Santa Clara Counties, where compliance was higher than in many other parts of the State, CRLA investigators nonetheless found, from April 1, 1969 to August 10, 1969, 30 cases in which toilets were not provided; 34 where toilets were not readily accessible; 54 where there was no toilet paper; 26 where there as an inadequate number of toilet facilities; 78 where there was no immediate access to handwashing facilities and/or no soap; 34 where no drinking water was provided; 57 where no individual drinking cups were provided; and 52 where drinking fountains were dirty or inadequate. In two cases, the toilet facility was found to

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be draining into the field.[23/] The Santa Clara Health Department, surveying field sanitation from June 18 to September 15, 1969, reported 42 "food crop growing and harvesting locations" which did not provide any toilet, and 86 which were poorly constructed, had unsatisfactory interiors, or did not provide toilet paper or handwashing facilities.[24/] Santa Clara County is a major producer of prunes, apricots and garlic.

In Santa Barbara and San Luis Obispo Counties, which produce peas, celery, lettuce, beans and berries, investigations conducted by CRLA from June 15 to July 15, 1969, revealed:[25/]

	LETTUCE	CELERY	STRAWBERRIES	TOTAL
TOTAL CHECKS MADE	35	6	9	50
TOILET FACILITIES				
No Toilets Present	29	3	1	33
Present, but Inadequate (b through f on our complaint form)	3	1	3	7
Toilets Satisfactory	2	3	5	10
NO HANDWASHING FACILITIES	35	6	9	50
DRINKING WATER				
Water Not Provided	31	3	4	38
Provided, but No Individual Cups	3	1	5	9
Water Satisfactory	1	2	0	3

Significantly, no handwashing facilities were observed in any of fifty investigations. In addition, in ten instances, the investigators found lettuce being packed in fields where there were no toilet facilities. Brand names observed on the lettuce boxes were "Bonita" and "Big D." In one case, workers were made to park

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[23/] California Rural Legal Assistance, Results of 65 Inspections of Fields, in San Benito and Santa Clara Counties, April 1, 1969 - August 10, 1969.

[24/] Santa Clara County Health Department Memorandum Regarding the 1969 Survey of Food Crop Growing and Harvesting, October 31, 1969

[25/] Summary of Field Sanitation Investigation - Santa Maria.

their cars in the field, directly over the lettuce. In another field, two women workers asked their foreman why there were no toilet facilities provided, and he told them simply to relieve themselves in the field.[26] Santa Maria growers sell to packers who in turn sell the produce to Safeway, Kroger, and Wynn-Dixie for distribution in Los Angeles, the Eastern United States and the South.

From August 22 to September 22, 1969, 358 sanitation violations were found by CRLA investigators in Madera and Fresno Counties, the raisin capitol of the world. Out of 79 complaints filed with local health authorities, 64 growers and labor contractors failed to provide any toilet whatsoever.[27]

In September, 1969, field investigations were again made by CRLA personnel in Monterey. Despite a field sanitation program described by State officials as the "most active" of any county in the State, 198 sanitation violations were found at locations employing 34 separate crews.[28] One location had an insufficient number of toilets for the number of workers in the field; ten crews had no toilet at all; five crews had a toilet which was more than five minutes from the place of work; nine crews had a toilet which was unsanitary to the point of being unusable; thirteen crews had no toilet paper; ten crews had no water; fifteen crews had no cups or drinking fountain; twenty-six crews had no handwashing facilities whatsoever; and fourteen crews had no first-aid kits.

Additional investigations were undertaken in Santa Barbara and San Luis Obispo Counties from October 24 to

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[26] Affidavit of Maria ___________ (her surname is withheld to protect her from possible harm), August 11, 1969.

[27] California Rural Legal Assistance, Madera office, Statistical Report on Field Conditions in Madera and Fresno Counties Covering August 22 to September 22, 1969.

[28] Letter from Dennis Powell, *supra*.

November 25, 1969. Out of 66 fields surveyed by CRLA investigators, 40 failed to provide any toilet facilities; 44 supplied no handwashing facilities, and 39 had no drinking water.[29] Fifty-one percent of the growers investigated failed to comply with any of the field sanitation requirements. The report concluded:

> "The data shows that there is no large grower who is in full compliance with the law. On the other hand, there is no large grower who never complies with the law. The smaller grower generally either complies in full or never bothers.
>
> "Likewise our data shows no packing house that deals only with law abiding growers. Packers ranged from 20 to 40 percent compliance. Thus we have no reason to single out any packing house as a 'clean' one, and can conclude that there is substantial probability that any lot of produce purchased through any packing house has been picked without the necessary sanitary facilities."

Thus, the violation of field sanitation laws continues throughout the State -- not at the astronomically high rate of 1967 and 1968, but at a rate substantial enough to merit serious concern.

IV

PRESENT LAW ENFORCEMENT TECHNIQUES HAVE NOT BEEN EFFECTIVE.

A. Not Enough Money Is Being Provided by County Boards of Supervisors.

The first statement heard from local health department officials is, "We don't have the man-power to enforce the Food Crop Growing and Harvesting Sanitation Act. The Legislature has given us the job of enforcing field sanitation laws, but it has given us no money." The sanitarians might add that county boards of supervisors also refuse to appropriate money for field sanitation enforcement.

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[29] California Rural Legal Assistance, Santa Maria office, Field Sanitation Survey, December 5, 1969.

The 1968 State Senate Sanitation Report indicated that in 1967-1968, only four counties in the State included specific budgetary requests for field sanitation enforcement. Six of the eight largest agricultural counties in the State budgeted no money expressly for field sanitation. In most of the counties in the State, the time spent on enforcement was infinitesimally small. To list just a few: Butte County expended .01 man-years in 1967-1968; Fresno, the largest agricultural county in the State, only .50 man-years; Merced, .42 man-years; Riverside, .13 man-years; Sacramento, .13 man-years; and San Luis Obispo, .05 man-years.[30] Eight county health departments, including the one for Tulare (the second largest agricultural county in the State), reported no time expended on enforcement. Twenty other departments devoted a total of 6.18 man-years to the problems.

While county sanitarians contend that enforcement efforts have increased in the last year, Warren Holm, Environmental Consultant, admits that most of the augmented effort has come in eleven counties where federal funds have been distributed through the Farm Workers Health Service Environmental Health Program.[31] The problem which is arising in these counties is that local boards of supervisors have refused to appropriate county funds to match the federal effort and, consequently, federal officials have decided to cut off the federal funding of on-going sanitation enforcement, arguing that it is a State and local responsibility.[32] San Luis Obispo and Santa Barbara Counties lost their federal funds in 1969. Monterey and San Benito Counties are losing federally-funded sanitarians this year; the remaining counties should be "phased out" in 1971. The results of the "phase-out" can already be perceived. The number of field inspections made in San Benito County has fallen from 423 in 1967-1968 to 81 in 1968-1969.

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[30] State Senate Sanitation Report, Table 1.

[31] Conversation of Warren Holm with James D. Lorenz, Jr., California Rural Legal Assistance attorney, March 12, 1970.

[32] U. S. Department of Health, Education and Welfare, "Introduction to Guidelines for Migrant Health Projects Offering Direct Care," February, 1970.

Holm is not optimistic about the willingness of counties to appropriate their own money for sanitation efforts, once the federal funds are withdrawn. San Benito County, for example, is making no effort to replace the sanitarian who was lost when federal funds were cut off. Similarly, in Santa Barbara and San Luis Obispo Counties, the Boards of Supervisors have failed to augment local enforcement efforts. Madera County has had no health officer since the last health officer went to Kings County. He left because the Madera County Board of Supervisors was unwilling to, in his view, adequately budget the county health department. Though the County has been advertising for a new health officer, the salary which they are willing to pay is the second lowest of any county in the State. (Merced County, another agricultural county immediately to the north of Madera, is the lowest.) And they have been unable to hire anyone. Because the County has no health officer, as is required by law, the County may lose federal and State public health funds. The report which the former health officer, Dr. Douglas B. Wilson, filed with the federal government on June 30, 1969, illustrates the extent of the problem:

> "[There is] inadequate comprehension of the needs of the county health department by elected and appointed officials. If the latter do in fact understand the need for staffing (salaries and additional personnel) and equipment to adequately administer a program that truly complies with Schedule A: Health Officer Certification, their actions (or lack of) did not demonstrate an understanding. Their attitude may be perfectly valid if they are carrying out the wishes of the electorate.
>
> "It will take years of health education to change this climate, if ever.

> "The strength of the department is in its dedicated personnel who for various personal reasons choose to work under conditions not ordinarily acceptable to government employees or those of private industry.
>
> "The volume of administrative work...is insurmountable.... This present writing and detailed minutiae is being drafted by the health officer himself, in longhand. The dictating equipment is inoperable, it is impossible to delegate because the staff have more than they can do."

If the county health departments are not able to pick up the slack in law enforcement, no other public agency is likely to, since, under California law, the local health departments are given "primary responsibility" for enforcing the field sanitation efforts.[33] C. F. Bryson, Jr., Program Supervisor for the field sanitation efforts of the State Department of Public Health, admits: "There is minimal effort on our part. We don't have the staff." The three regional supervisors in the State Department who are assigned to field sanitation problems spend their time contacting local health departments and encouraging them to work on sanitation problems. "We have not looked at the departments to see what they are doing," Bryson says. Nor does the State Department make direct field inspections or require the counties to report on their field sanitation enforcement efforts or require them to prosecute violators of the law -- even though, under the Health and Safety Code, the State Department must set standards for the operation of county health departments and must control and regulate their actions.[34]

The State Senate Sanitation Report, which revealed glaring inadequacies in local enforcement of sanitation laws, has been out for two years, but the State Department has made no follow-up study of any kind, to see whether the county health departments are doing a better job. The Stanislaus County Director of

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[33] Memo from Frank M. Stead, *supra*.

[34] California Health and Safety Code §§1130, 207.

Environmental Health states that there is not much coordination between the Stanislaus County Health Department and the State Department of Public Health, it being his belief that the State Department is focusing on migrant housing problems, and is leaving to the counties the enforcement of the field sanitation laws.[35/]

The Division of Labor Law Enforcement and the Division of Industrial Welfare, which assist local health departments in enforcing sanitation requirements, are understaffed right now, and are likely to be cut 10% to 20% more, if the budget cuts authorized by the Governor are approved by the Legislature this year. DIW and DLLE each have one investigator, for example, for the four county area of Santa Clara, Monterey, San Benito and Santa Cruz -- the primary vegetable growing area in the United States. One agent covers Stanislaus, and part of San Joaquin, Counties for the DLLE.[36/] DLLE reports that because of its understaffing, once a labor contractor has been warned on violations of the law, the DLLE agents rarely have the time to return to the delinquent's property to see whether he is in compliance with the law. Only able to avail themselves of these "one shot checks," the DLLE is often not able to keep enough pressure on growers to assure more than temporary compliance. The Division of Industrial Safety, a State agency which also supposedly gets involved in field sanitation enforcement from time to time, reports that, given its understaffing problems (and an anticipated 20% cut in its funds this year), it is able to do virtually nothing about field sanitation violations which it runs across while undertaking field inspections.[37/] The problem has been stated most succinctly by a representative of the Division of

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[35/] Conversation between Jim Mankin, Director of Environmental Health for Stanislaus County, and John Kelley, California Rural Legal Assistance attorney, March 6, 1970.

[36/] Interview of Jim Mankin, _supra_, footnote 35.

[37/] Conversation between C. F. Bryson and James D. Lorenz, Jr., California Rural Legal Assistance attorney, March 12, 1970.

the Industrial Welfare, Chester DeRoo: "It is almost an insurmountable task."[38/].

B. Health Departments Rely on "Education" Rather Than Law Enforcement.

The lack of money is part of the problem for many county health departments. But even if more money were provided to many counties, sanitation violations would continue, for as one farm worker from South Modesto has aptly put it: "The growers know that some health departments are just a bunch of cookie pushers who are afraid to come down hard on the law."[39/] This view is corroborated by statements of certain growers. "I know that the health department isn't going to sic the district attorney on me," stated one San Joaquin Valley grower who wishes to remain anonymous. "If their investigator does come around, and finds out I don't have a toilet in the field, he'll ask me to get one in. That's all. So I figure to wait until they catch me, then put in the toilet for awhile, and then not worry about it." As Denny Hackett, the field foreman for the S. R. Gerrard Cauliflower ranch in Santa Barbara County, said on October 8, 1969, to CRLA investigator Israel Torres: "Go ahead and turn in your report. I don't care. I know the people in the health department. The workers don't need the facilities. They can p--- and s--- in the fields."[40/]

Most county health departments spend their time on education, rather than enforcement. "I have had to strike the word 'enforcement' from my vocabulary and use the word 'education' instead," admits Roland Perkins of the San Benito County Health

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[38/] Letter from Chester DeRoo to Carlos Ynostroza, California Rural Legal Assistance attorney, September 11, 1969.

[39/] Northern Santa Barbara County, for example, employs five sanitarians, but continues to have a very high number of violations.

[40/] Declaration of Israel Torres, supra, footnote 5.

Department.[41] "This has been a traditional situation with most of them," comments Warren Holm of the Farm Workers Health Service when describing the "educational" approach to everything taken by local health officials. The State Department of Public Health states that it has distributed 23,000 brochures on field condition requirements in the past two years. After more than four years of advertising to growers and labor contractors that they must provide toilets and handwashing facilities wherever food is grown and harvested, some health officials still contend that employers violate the law because they are ignorant of its requirements. Others, such as Dr. Matthis of the Santa Clara County Health Department, say that they fear they will lose what little "cooperation" they now get from growers if they adopt a law enforcement approach. In Madera County, the grower-dominated Board of Supervisors closely regulates the manner in which the health department works.

In keeping with the "education only" approach, at least nine counties failed to undertake any field investigations on their own initiative in 1967-1968, relying solely on the complaints which were reported to their offices.[42]

Not surprisingly, with their health officials rarely out in the fields in contact with farm workers, these counties rarely received any complaints. The record of the most aggressive county departments, such as Monterey, clearly indicate that in order to turn up violations, the departments have to repeatedly initiate unannounced visits. Thus, in 1967-1968, two county health departments made 40% of all the investigations in the State, and uncovered more than 50% of all the violations reported By contrast, thirteen departments which acted only or primarily in response to complaints reported that they had not uncovered a single violation.

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[41] Conversation between Roland Perkins and Diane Delevett, California Rural Legal Assistance attorney, March 11, 1970.

[42] State Senate Sanitation Report, Table 1, p. 11.

Other counties which make field investigations often do so in a sloppy manner. It is fairly common for agents to observe a field from the road and, if they note one or more portable toilets in the field, they drive on, assuming that the employer is in compliance with all sanitation requirements.[43] The frequency of these sloppy "investigations" is apparent in statistics released by the State Senate in 1968. For example, Stanislaus County reported 330 investigations, but no drinking cup violations whatsoever, even though drinking cup violations were frequently noted in counties which made comprehensive inspections. Santa Clara reported zero drinking cup violations, and only three instances of failure to provide toilets, out of some 254 inspections. Santa Cruz County noted no violations in 1,942 inspections -- as compared with the 1,023 violations noted in neighboring Monterey County in the same year.[44] Madera County merely failed to record any of the violations which they may have observed.[45] (In 1969, a grower named Harley Phillips was found by CRLA investigators to be in violation. After inspecting his property, the Madera County Health Department reported no violation. At the same time, however, the DLLE investigated, and found so many violations that it issued a citation against the grower.)

When a department has no on-going field sanitation program, the tendency is to make a massive survey of just one area for one season to justify the department's lack of commitment to law enforcement. Employers know from experience that such a survey will be made only once and will not recur if the statistics are not too shocking. In Santa Clara County the health department inspected 738 food crop growing and harvesting locations between June 18 and September 8, 1969. One hundred twenty-eight either had no toilet facilities or had inadequate facilities. In spite of this large number of non-complying locations and the hundreds of farm workers compelled to work at jobs with no sanitation protections, the health department stated: "Because of the high level of compliance with the Food Crop Growing and Harvesting laws..., it is recommended that the program be continued in the future on a referral or complaint basis."[46/]

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[43] Ed Kerry, California Rural Legal Assistance Attorney, "Evaluation of Effectiveness of Local Enforcement Authorities, March 10, 1970.

[44] State Senate Sanitation Report, Table 1, p. 20.

[45] Ibid.

The ineffectuality of the health departments leads to a self-fulfilling prophecy: Because the departments respond only to complaints which are never made, or make sloppy inspections, they are able to report that there are no problems "apparent" in their counties. It is almost an ideal system, if you are a delinquent grower or labor contractor.

Even where violations are reported, the response of many counties is ineffectual. The inspection form given to a delinquent grower by the Yolo County Health Department fails to even inform the grower that he is in violation of the law. A number of county sanitarians give a delinquent grower a "talking to," rather than handing him a written warning. Thus, as in Madera County, they have no complete record of who is, or has been, in violation. If a verbal warning proves insufficient, many health departments will call the delinquent into their office for a chat, or, as some say, "an informal hearing." A farm worker who has complained about the delinquent has no assurance that he will be present at this hearing. If the delinquent still fails to comply, he may be given a written citation in a few counties

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[46/] Herbert Schirle, Santa Clara Health Department, Memorandum on The 1969 Survey of Food Crop Growing and Harvesting," Oct. 31, 1969, p. 5.

notably, Monterey, San Luis Obispo, San Joaquin and Stanislaus, but in most counties, he most likely will be given another written notice. The procedure which Santa Barbara County follows is illustrative: "1) Inspection, 2) reinspection, 3) written notice, 4) reinspection, 5) office hearing, 6) referral to DA." While a few departments give delinquents twenty-four to forty-eight hours to comply, most are considerably more lenient. In 1967-1968, Sonoma gave five to fifteen days; San Diego, one to fifteen days; Yolo, seven days; Kings, five to fourteen days.[47/]

Not surprisingly, few, if any, growers are found to be in violation at the end of this involved process of bureaucratic delay. Most county health departments don't have staffs adequate enough to make repeated visits. Moreover, by the time that a second or third reinspection would take place, the farm workers hired by the grower are likely to have moved on to another place of employment. Repeated checks on a widespread basis are impossible during the peak of the harvest.

Even where some health departments have been willing to take violators to court, they have often been unable to secure the assistance of local district attorneys' offices. "Public health is of zero importance to most district attorneys," Warren Holm says. Not only do the district attorneys require "a very serious case" of continuing violations before they will consider doing anything, but they often refuse to rely upon health department investigations, contending that if investigations are to be made, they will have to be done by their offices. Since the district attorneys do not want to tie up their own investigative resources, they are even less willing to become involved. According to the State Senate Sanitation Report of 196 only three criminal complaints were filed in the whole State in 1967

[47/] State Senate Sanitation Report, p. 20.

and 1968 regarding field sanitation requirements.[48] In Kern and Tulare Counties, where farm workers exerted the most pressure for criminal prosecutions, at least two criminal complaints were filed in 1968 and 1969, but that was about the only action taken. The position of the Kings County district attorney was typical: When informed that Westlake Farms (which had received $341,797.00 in federal crop subsidies in 1968) was guilty of multiple violations of sanitation laws, he refused to take any action, advising the agent for the Division of Industrial Relations that he would need four or five more violations before he could do anything.[49]

Although labor contractors have an even higher violation rate than do growers, the Division of Labor Law Enforcement has made clear in Kern, Tulare and Kings Counties that no matter how many violations are reported for a given farm labor contractor, the Division will not act to revoke or suspend his contractor's license, despite its clear authority to do so.[50] According to a policy apparently promulgated in the Division of Industrial Welfare, the DLLE agents feel they are not authorized to file criminal complaints with the appropriate district attorney even if recurring violations are observed.[51]

The unwillingness of certain agencies to act is underscored when a few instances of tough enforcement which have occurred are considered. For example, at least eight citations were filed in Madera Justice Court by the Fresno office of the Division of Labor Law Enforcement in September, 1969. If other offices of the DLLE and the DIW had been willing to take similar action, the number of violations in the State might have been reduced appreciably.

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[48] State Senate Sanitation Report, Table 2, p. 12.

[49] James Smith, California Rural Legal Assistance attorney, "Statistical Summary of Violations Observed, Report to State Agencies and Action Taken," August 1, 1969.

[50] See Labor Code §1690(f).

[51] Smith, _supra_, footnote 49.

Many local health offices contend that they do not issue written citations themselves because they are not legally authorized to do so. They fail to add that the power to issue citations could immediately be granted to sanitarians if local health offices requested local sheriffs to deputize sanitarians.[52] This approach, which is completely valid and possible under California law, has been undertaken by a few county health departments, notably in Riverside and San Joaquin Counties. Monterey County is also now considering empowering its sanitarians to issue written citations. While health officials in these counties acknowledge that even with the power of deputization, written citations are rarely issued, they argue that it nonetheless functions as a more effective deterrent than does the purely educational campaigns carried out by most health departments. The main advantage of the citation method is that it enables the local health department to call a violator into court on its own initiative, without reliance upon initiation by the district attorney. (Of course, if the case is contested by the alleged violator, the district attorney will have to enter the case, but, as with traffic citations, he then does not have the discretion to refuse to enter the case.)

While some local health officials admit that the citation method is looked upon with favor in progressive sanitarian circles a number of counties resist this approach. "Not yet," says Mr. Perkins, the San Benito County sanitarian.[53] Doug Pratt, the chief sanitarian for Madera County agrees, contending that if the health departments took peace officer's duties, they could "make mistakes."[54] The Santa Barbara Health Departments says it doesn't use the citation method befause it feels that farmers "will come around better" without using it.[55] Santa Barbara's approach differs from that of San Luis Obispo County, which issues conditional citations, whereby a citation is issued, but is then withdrawn if the violations have been corrected in one day.

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[52] California Penal Code §830.6. Under §26625 of the California Health and Safety Code, sanitarians may already have this power.

[53] Conversation between Mr. Perkins and Diane Delevett, *supra*, footnote 41.

Farm workers are cynical about the unwillingness of any county health departments to get tough with persistent growers. The farm workers know that if they disobey a law, they are likely to be prosecuted. Yet, they watch many of their bosses break the law with impunity, year after year. As one farm worker said: "We get prosecuted; they're given pamphlets."

C. In Failing to Enforce Sanitation Requirements, Many County Health Departments Are In Violation of the Law.

Section 452 of the California Health and Safety Code provides that county health offices shall enforce all statutes relating to the public health. Many counties have failed and/or refused to do so. In particular, Santa Barbara, Madera, Kings and since 1969, Yuba-Sutter and San Benito Counties have failed to enforce public health statutes.

Section 453 of the Health and Safety Code states that "[e]ach county health officer shall report to the State Department all violations of the State health laws that come to his attention." With the exception of those counties presently funded by the Federal Migrant Health Project, most or all of the counties in the State have failed to comply with this provision.

Section 26604 provides:

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[54] Conversation between Doug Pratt and Chris Bradford, California Rural Legal Assistance law clerk, March, 1970.

[55] Report of Dan Morper, California Rural Legal Assistance law clerk, on sanitation law enforcement in Santa Barbara County, March 11, 1970.

> "The district attorney of each county shall prosecute all violations of the provisions of this chapter [relating to field sanitation and adulterated food] occurring within the county." (Emphasis added.)

Every district attorney of every agricultural county in the State has failed to comply with this provision, with the exception of not more than ten cases in four counties in the past three years.

D. In Failing to Supervise Local Health Departments and To Enforce Health Laws, the State Department of Public Health Is In Violation of the Law.

Section 200 of the Health and Safety Code charges the State Department with the responsibility of examining the causes of communicable disease in man and domestic animals occurring or likely to occur in the State. Section 201 says that the Department "shall call a special investigation of the preparation of the sale of drugs and food and their adulteration." In failing to examine the serious problems of field sanitation which were raised by the State Senate Sanitation Report, the State Department has failed to comply with both of these provisions. In failing to take any action to require local counties to enforce sanitation requirements, the Department has also failed to comply with §202, which says that it "shall perform such duties as are required by law for the detection and preventio of the adulteration of articles used for food and drink, and for the punishment of persons guilty of violation of any law providing against their adulteration."

Section 207 provides that when, in the judgment of the State Department, the public health is menaced, it shall control and regulate the action of local health authorities. Despite firm determinations by the California Legislature that public health is menaced when adequate sanitation facilities are not provided in food crop areas, the State Department has taken no action to control and regulate the action of ineffectual county health departments.

Under the Health and Safety Code, a State Department can provide State financial aid to local county health departments which meet minimal standards, but, under §1155, no funds may be allocated to any local health department which does not meet minimal standards. Despite the fact that the efforts of some health departments in the area of field sanitation have been negligent, the State Department has made no determination whether State aid should be cut off to these delinquent local health departments. Nor has the State Board of Public Health made any determination, pursuant to §26623 about whether local health departments are enforcing the law, even though there is clear evidence that they are not. Likewise, the State Board has made no effort to comply with §26630, which says that the Board may prescribe such rules and regulations relating to the operation of the local health departments as it may deem necessary fully to effectuate the provisions of the Health and Safety Code.

V

PRAYER FOR RELIEF.

Given the serious problems heretofore cited, as well as the continuing violations of law, petitioners request the State Department of Public Health and various local county health departments to comply with legal requirements relating to field sanitation. In particular, petitioners request the following actions to be immediately undertaken by all county health departments and to be required of local health departments by the State Department of Public Health:

1) In each county where food crops are grown, the health department must employ, during the growing and harvesting seasons, one to five full time sanitarians, depending upon the size of the county, in order to enforce the field sanitation requirements. The number of sanitarians employed should be

consistent with standards set by the State Board of Public Health, based upon a determination by the State Board as to how many sanitarians are necessary in the county. The standards should clearly indicate at what point, and under which circumstances, a local health department will cease to function as an authorized representative of the State Department of Public Health.

2) Local health departments must institute a program of field investigations made at the initiative of the department on a continual and unannounced basis -- rather than the complaint-initiated programs which now exist in certain counties.

3) All sanitarians with the responsibility for enforcing field sanitation regulations must be deputized by the county sheriff at the request of the local health officer, pursuant to Penal Code §830.6; and the sanitarian empowered to issue citations to violators of field sanitation laws.

4) Whenever a grower or labor contractor is found to have violated the field sanitation laws for the first time during any one year period, he shall be issued a "conditional citation" requiring a justice or municipal court appearance by the delinquent unless the violation is cleared within 24 hours after the conditional citation is issued.

5) Whenever a grower or labor contractor is found to be in violation of the field sanitation laws on two or more instances during any one year period, or whenever a grower or labor contractor is found in serious violation on even one instance, a non-conditional citation shall be issued to him by the local health department, requiring him to appear in justice or municipal court.

6) Each violator shall be required to state at the time he is given a citation, conditional or otherwise, the names

of those packers, wholesalers, canners, or retailers to whom he sells produce.

7) Whenever, during any two year period, any grower or labor contractor is found by the local health department to be in violation of the sanitation laws on three or more occasions he shall be declared to be a "persistent violator." Once a month, a list of the names of "persistent violators" shall be sent to all fruit and vegetable wholesalers and retailers operating within the State of California, along with a letter from the State Department explaining their potential liability under Health and Safety Code §§26470, 26510, 26515 and 26520. The list shall also be made available to the public, including farm workers and consumers.

8) All sanitation violations involving labor contractors should be made known to the labor commissioner who licenses labor contractors. If any labor contractor is guilty of two ~~or less~~ violations, the labor commissioner should consider suspending his license for a certain number of days and placing him on probation. If any labor contractor is guilty of three or more violations during any one year period, his license must be revoked.

9) Twice a year, each county health department shall submit to the State Department a report setting forth what actions they have taken to enforce the sanitation laws, including the number of complaints received, the number of investigations initiated, the number and kind of violations discovered, and the action taken to correct the violations. Each year, the State Department shall prepare a report, setting forth the information received from each county health department.

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Petitioners submit that if the foregoing steps are instituted, the State Department of Public Health will be able to insure a 95% improvement in food crop sanitation.

Dated: March 26, 1970

Respectfully submitted,

/s/ James D. Lorenz, Jr.
James D. Lorenz, Jr.

/s/ Diane Delevett
Diane Delevett

Attorney for Petitioners

ACCESS

A Preliminary Position Paper
Prepared by the
Migrant Legal Action Program, Washington, D.C.

Section I: The Problem

All attempts to assist the migrant farmworker must initially address the basic problem of securing for outsiders -- health inspectors, O.E.O. funded employees, community or other organizers -- access to the residential migrant camp.

The migrant farmworker, as will be repeatedly emphasized in this report, is required to work a maximum of working hours each day yet receives a minimum of monetary rewards for his efforts. He and his family customarily are forced by economic necessity and by the grower's dictates to live on his employer's property, thereby significantly diminishing the worker's freedom.1/ As a result of this unfortunate anomaly, the migrant farmworker frequently requires the assistance of the members of the surrounding community, whether this be medical, legal, social, or other help. Yet when he seeks help, he has neither the time, the money, nor the

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1/ See, e.g., Grim, Willamette Law Journal, Vol. 6, No. 1, March, 1970, pp. 111-130.

transportation to leave the grower's fields or the confines of the residential camp to seek out the assistance that he requires.

Nevertheless, the needs of the migrant will not disappear simply because he is unable to leave the grower's premises. The needs remain, and so, if they are to be met, it becomes imperative that the members of the surrounding community have the freedom to communicate with and associate freely with these farmworkers and to enter within the physical confines of the residential camps without fear of reprisal. In short, outsiders should be free to render to the migrant worker and his family those basic educational, medical, legal and other services that they so greatly require if their lives are to be improved ever so slightly.2/

By denying the members of the surrounding community the freedom to enter the camp, to exchange ideas with the migrant farmworker, and to serve him, the grower has transformed the residential camp into a prison and reduced

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2/ Kent Spriggs, "Access of Visitors to Labor Camps on Privately Owned Property," University of Florida Law Review, Vol. XXI, 1969.

its residents to the status of serfdom.[3] As this Subcommittee has previously pointed out:

> "To the average person, it is inconceivable that his landlord should have the right to determine who shall, and who shall not be able to visit his home. But in the name of property rights, some owners of migrant labor camps presume to bar all outsiders who, they, in their sole discretion, determine should be allowed to see the residents of the camp. In this way, they keep out not only just peddlers, but union organizers, priests and ministers, poverty program workers, lawyers, and so called do gooders, who they think might in some way interfere with the docility of their captive work force."[4]

To the average person the vesting of such all encompassing power in a single person may appear inconceivable. But to the resident of the migrant labor camp, and to anyone who has ever attempted to assist the migrant and his family, the situation and the power are familiar ones.[5] It is not unusual for an individual who has attempted to assist a migrant farmworker at his home to return to relate the shock of encountering fences of barbed wire and electric cables, signs reading "Keep Out," "No Trespassing," "Private Property," "Non-Residents Not Allowed," a pack of unfriendly watch dogs, a group of large and always strong workhands, the hard face of the foreman or the grower, and far too often the wrong end of a gun.[6]

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[3] "A member of a servile feudal class bound to the soil and more or less subject to the will of his lord," Websters Seventh New Collegiate Dictionary, G & C Merriam Co., Springfield, Mass., 1961.

[4] "The Migratory Farm Labor Problem in the United States," 1969 Report of the Committee on Labor and Public Welfare, U.S. Senate, made by its Subcommittee on Migratory Labor pursuant to S. Res. 222, 90th Congress, 2d sess. as extended. A Resolution Authorizing a Study of the Problems of Migratory Labor, February 19, 1969, p. 49.

[5] See, e.g., Moore, Testimony to Senate Subcommittee on Migratory Labor Hearings, July 21, 1970, p. 3.

The lack of access to the grower's camps for migrant farmworkers can be viewed from two perspectives -- its cause, the grower's attitude; or the detrimental effect on the migrant farmworker.

From the viewpoint of the grower, the denial of access to his residential camps to members of the outside community presents no problem at all. To justify his continual refusal to open his residential camps to those who wish to help the migrant farmworker, the grower has relied upon his legal rights as the sole owner of the property upon which the migrant workers reside. As a purely legal matter, the growers' position is by no means correct. Yet while this position may ultimately be discredited by future judicial rulings, the growers' asserted absolute right over his property is almost universally honored by local law enforcement officials and prosecutors.

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[6] See generally, Martin Carr, "Shame is Still the Harvest," New York Times, July 12, 1970; Newlon Lloyd, Testimony on Migrant and Seasonal Farmworkers Powerlessness, Hearings before the Subcommittee on Migratory Labor of the Committee on Labor and Public Welfare, United States Senate, 91st Congress, August, 1969; Robert Coles and Harry Huge, "Peonage in Florida," New Republic, 161:17-26, 1969; New York Times, August 23, 1970, p. 1, section II.

The grower's traditional justification for denying access goes beyond reliance upon property rights. To justify this behavior, the grower frequently claims that there is no need for access to provide the requested service because he, the grower, provides for all the needs of "his migrants."

> "In some respects the relationship between farmers and migrants has overtones of paternalism, and the farmers sometimes are critical of 'outsiders' and 'do gooders' who are concerned about the welfare of 'our migrants.'"7/

This attitudinal problem has far reaching consequences and cannot be lightly regarded. Perhaps only unionization can create bargaining among equals, thereby altering grower attitudes. But without a clearly defined right of access or statutory protection, organizational efforts are

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7/ "Farm Employer Attitudes Toward Mexican-American Migrant Workers," Eldon E. Snyder and Joseph B. Perry, Jr., Rural Sociology, Vol. 35, No. 2, January, 1970.

rendered far more difficult. From the viewpoint of the migrant farmworker living within the grower's camp, the denial of access to members of the outside community causes isolation and stagnation which imprints itself on every aspect of his social, political, psychological being.[8] Dr. Robert Coles summarized the impact upon the migrant farmworker of being forced to live in total isolation:

> "They come and they soon leave. They not only do this but they know they do, and they feel the implications of their behavior, the facts of their arrival, work and departure in isolation from the life of the various communities whose fields they infiltrate and work."[9]

> "A migrant camp is a microcosm of nearly every social ill, every injustice: poverty almost beyond belief, rampant disease and malnutrition, racism, filth and squalor, pitiful children drained of pride and hope, exploitation and powerlessness..."[10]

The isolation of a group of human beings is unnatural. Every human, no matter how transient his life may appear, does reach out by instinct to find some sense of identity,

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8/ See generally, Spriggs, supra.; N. Compton, "Green Valley Isn't So Jolly: Migrant Labor Camp Conditions, Yakima," New Republic, 159:19-20, 1968; Huge and Coles, supra., "Peonage in Florida."

9/ Robert Coles, Subcommittee Report, 1969.

10/ Senator Walter Mondale, Hearing of Senate Subcommittee on Migratory Labor, Monday, July 20, 1970.

some type of roots, some place recognized as his, even if for just a little while.11/ Yet the migrant farmworker cannot find this sense of belonging in the residential camps of the growers. Within the grower's camp, the migrant can find no time within his long day in which he can establish some type of structure for his family. He usually has no place where he can go, shut the door and be his own master. When his child gets sick, he has no doctor he can call. When he has a problem, he has no one outside the migrant community he can turn to. When he finds some time for relaxation there is no place where he is allowed to invite friends from outside the camp. In short, the migrant has nothing tangible that he can call his own while residing within the residential camp.

The migrant farmworker recognizes his own needs and those of his family, and so he attempts to reach outside the world of the residential camp to find the educational, medical, legal, social and other services he knows he needs if he is ever to cease being a poorly paid, transient laborer. Yet it is difficult for the migrant farmworker to reach out and obtain the help he needs. The migrant's long workday and lack of money and transportation make it physically difficult for him to leave. The fact that the

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11/ See generally, Robert Coles, Migrant and Seasonal Farmworkers Powerlessness, July, 1969, Part II, page 349.

migrant does move from place to place denies him any political voice he might use to gain his freedom.12/ His lack of money will not allow him to simply give up the life of the grower's camp. His language barriers, color, cultural differences, and lack of education make it nearly impossible for the migrant farmworker to establish any sort of life, if he were able to leave the residential camp. Without the ability to have the help he so desperately wants and needs come to him, the migrant farmworker is trapped in the world created for him by the grower.

The result of the migrant's physical environment is the creation of a life style marked by extreme fear and psychological struggle. What does the migrant farmworker do to adjust to the physical environment created for him by the grower? He copes. He sublimates his anger and transforms his fear and frustration into complacent indifference.13/ The migrant farmworker is trapped.

> "We the migrants live in fear because we have been indoctrinated with it. We live in shame,

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12/ See generally, Spriggs, supra.; 111 Congressional Record 13,330 (1933); and Grim, supra.
13/ Coles, supra., Sub-Committee Report.

> because we are treated as the scum of the nation. And we live in hopelessness for experience has shown us that there is no road open to us except back to the field."14/

14/ Elijah Boone, Migrant and Seasonal Farmworkers Powerlessness, Part I, June, 1969, page 174.

Section II: Attempted Solutions And Their Results

The first step that must be taken to end the migrant farmworkers' return "to the field" is a clear resolution of the access problem. Those wishing to help the migrant must be able to reach him, make him aware of his rights, advise him of solutions to his more pressing problems, and render short-term health, educational, and legal assistance within the migrants' own milieu. By reaching the migrant within the growers' camp, the individual attempting to provide the assistance is able to meet and talk with the migrant without being hindered by extraneous pressures. These pressures include the necessities of finding the money and transportation to reach any outside source of help; having to give up a day's pay, and sometimes to jeopardize an entire job, in order to obtain help; and counteracting the intense psychological pressure of isolation -- the knowledge that he is all alone, and that there is no one who can take his side.

The earliest response to the problem of access involved the institution of a variety of forms of test litigation designed to challenge the right of the grower to prevent individuals interested in assisting migrants from entering the residential camps and meeting with the migrants in their "homes" or in the community areas of the camp.

The most common factual pattern giving rise to this litigation can be summarized as follows:

The grower offers little objection to visitors. He is either unaware of their presence -- e.g., they are minority "outreach" workers from social service programs; because they visit surreptitiously; or because they dress to blend in with the migrants. In other cases, outsiders are expressly permitted to come and go freely since they provide services which make "his" migrants "happy workers." Contained within that group which is often allowed free access to the migrant residential camp are nurses and individuals who run educational programs for the children. It it only when those whom the grower deems undesirable enter the camp -- i.e., individuals whose occupation or ideology make them destined to "cause trouble" -- that the grower will begin to restrict access. Those contained within the group of "troublemakers" are those who assist the migrant to qualify for the food or welfare programs, those who inspect for the housing code violations, and those who inform the migrants that they do have rights and provide advice as to the enforcement of these rights.

The first step is posting the property with "No Trespassing" or similar signs. Next come the verbal threats of arrest or even physical violence which too soon become commonplace. Then the police are called in to tell the visitors to leave or to arrest such visitors. Finally, when the threats and the warnings are ignored, or legal coercion is deemed inadequate, the grower resorts to physical violence. Indeed, the assaulted visitor may even be confronted with a criminal complaint alleging criminal trespass, vagrancy, or even assault, naming him as the Defendant. Also, the migrant, his family, and friends may be subjected to various forms of reprisal including loss of employment and/or housing.

A few cases raising access issues have been fully litigated. While they offer guidance to lawyers and judges involved in still pending cases, they are by no means dispositive of this problem. The only clear statement of the right of access occurred in companion cases arising in the same state. In Oregon v. Cameron, 290 F. Supp. 36 (D. Ore. 1968), the Court held that VISTA volunteers were, in effect, government employees and therefore entitled to have trespass charges against them heard in federal court. When a companion case was heard by another federal judge sitting in the same Court, it was dismissed. (Oregon v. Wilcox, Cr. No. 69-670, unassigned order 2-12-70) The judge in Oregon v. Wilcox accepted the VISTA volunteers contention that their First Amendment rights of free speech and association should prevail over the property owners' use of the State's criminal trespass law in order to keep visitors out of his camp. Finally, in Dodge v. Nakai, 298 F. Supp. 17 (N.D. Ariz. 1968), a federal court held that an Indian tribe may not bar O.E.O. funded attorneys from the reservation when they seek to confer with their clients.15/

These civil cases offer a modest beginning.16/ Many

15/ See also U.S. v. Shackney, 333 F 2d 475 (1964), reversing on procedural grounds a vindication of access rights to prevent the involuntary servitude of the migrant residents.

16/ Earlier cases include: Puerto Rican Farm Workers, et.al. v. K.D. Eatman, et.al., Civil Action No. 68-1417 - Civ. - CF, D.C.S.D. Fla. (complaint dismissed by District Court, reversed and remanded by 427 F 2d 210 (5th Cir 1970)); Curry, et.al., v. American Foods, Inc., Civil Action No. 68-1286-Civ-CF, D.C.S.D.

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more cases have been filed and some still are pending before the courts. The problems which the more recent cases attempted permanently to alleviate were those of bringing medical and public health assistance to the migrants,[17] providing them with legal advice,[18] securing the right for migrants to invite guests to their homes within the confines of the growers' camps,[19] and securing the

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16/ (cont.) Fla.; Spriggs v. Cayuga Producers Coop, Inc., Civil Action No. 68-CV-291, D.C.N.D. N.Y.; Degoliado v. Stokely-Van Camp, Inc., Civil Action No. CV 69-183-D, D.C.E.D. Ill. (pending).

[17] Folgueras et.al., v. Hassle et.al., currently before the United States District Court for the Western District of Michigan, Southern Division, and Linsay et.al. v. Hendershot, currently before the Supreme Court of the State of New York, County of Monroe.

[18] Peper et.al., v. Cedarbrook Farms, Inc., et.al., on appeal to the Third Circuit; California Rural Legal Assistance, Inc., et.al. v. Zanger, et.al., brought in the United States District Court for the Northern District of California.

[19] See the recently dismissed case of Teneyque, et.al. v. Ferris brought before the United States District Court for the Northern District of Iowa, Central Division.

rights of union organizers to solicit membership within the growers' camp.20/ Irrespective of the civil cases which seek to establish access rights in an affirmative matter, there remains the deterrent effect resulting from the widespread use of the criminal law by growers and state officials to prevent access in migrant labor camps throughout the country.21/

The use of litigation in an affirmative manner; challenges to improper reliance on criminal law; and the growing militance of union and community organizers, social workers and young lawyers have escalated the level of conflict in access cases.22/ In a number of large states -- California, Michigan, and New Jersey, to name a few -- a significant increase in hostility and often violence accompanied the growers' assertion of property rights. The difficulties resulting from litigation, in turn, have further increased the militance of the camp visitors and residents, leading to FBI and state law enforcement investigations, opinion letters and rulings

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20/ C.R.L.A. v. Zanger, supra.
21/ See, e.g., State of New Jersey v. Shack, et.al., (Docket No. AM-369-69); "Visiting Rule Set on Migrant Camps," New York Times, November 8, 1970.
22/ See generally, Harper, supra.; Morris, "Migrants Feeling New Power," Detroit Free Press, July 26, 1970; Sullivan, "U.S. Urged to Investigate Charges of Jersey Farmers," New York Times, August 23, 1970; "Jersey's
(footnote continued)

by various attorney generals, legislative proposals, and attorney general statements on proposed rulings.

Illustrative of the state access legislation is that contained in Governor Cahill's recent proposed migrant legislation. A section proposes to guarantee "reasonable visitation rights" for federal and state anti-poverty health and educational officials. While the section acknowledges the rights of these officials to carry out their duties, it also fully protects the growers' rights as landlord and employer.

A similar approach has been adopted by recent Department of Justice Guidelines, which were proposed to resolve a continuing access controversy in Oregon. The guidelines were the result of negotiations between representatives of O.E.O. funded programs and grower groups and must be accepted by growers on an individual basis. Substantively, they provide that O.E.O. funded

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22/(cont.) Migrants: A Hardly Human Existence," New York Times, August 23, 1970; Sullivan, "Two Poverty Aides Arrested at Jersey Migrant Camp," New York Times; Berman and Hightower, "Battle for Lettuce," Nation, November 2, 1970; Report to Subcommittee from Migrant Legal Action Program on Western Michigan violence (Carey letter, October 10, 1970).

employees may enter the camps after working hours or on non-working days for "reasonable" periods of time; that visits may be made during working hours only to serve non-working members of the family and migrant children; and the growers must receive in advance literature intended for distribution to the workers.

Section III: Conclusion

The necessity of establishing a clear right of access to migrant labor camps should be obvious enough. However, the futility of present attempted solutions may not be so self-evident.

The legislative proposals are far too narrowly conceived to provide any far reaching redress to the economic and politically powerless migrant. The New Jersey Bill and the Justice Department Guidelines share common basic flaws: both jealously guard the grower's property rights while ignoring the visitors' constitutional rights of free speech and association. It should be beyond dispute that visitation rights should not be made dependent solely on the visitor's employment by governmental agencies. Surely the migrants have in common with all other citizens the right of access to marketplace of ideas and the right to associate freely with all persons of their choosing.23/

23/ The New Jersey bill is particularly weak since it requires an express or implied invitation to specified governmental officials before protection is afforded. Moreover, the only expressly conferred right is to initiate (footnote continued)

The Justice Department Guidelines must be faulted for expressly refusing to offer guidance for treatment of union and community organizers who seek to exercise their First Amendment and other rights. At best, the guidelines can be viewed as making a good start in reducing the level of animosity between O.E.O. funded organizations and local growers.

There still remains a pressing need for a definitive legal opinion from the U.S. Attorney General. This opinion should unequivocally conclude that federal and state legislation designed to protect migrants -- e.g., the Economic Opportunity and Migrant Health Acts, etc. -- create an implied right of access at reasonable times during non-working hours and days, in emergencies, and generally in cabins where children and non-working members of the family reside. More importantly, the opinion should

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23/ (cont.) a legal proceeding to obtain protection against some future abridgment of rights. Nevertheless, Governor Cahill should be commended for frankly recognizing the problems. Other governors, facing similar problems, should be equally prepared to propose solutions to this longstanding, but egregious problem.

address itself squarely to the reciprocal nature of the constitutional rights of the visitors and the migrant residents.24/ This opinion would hold great moral force and would also govern the Department's enforcement of existing laws.

The Justice Department can be much more vigorous in its enforcement of existing laws. Its Civil Rights and Criminal Divisions can invoke a multiplicity of laws, not the least of which is Title 18 USC Section § 245. This new provision expressly protects against violence and intimidation of both visitors and migrant residents who are exercising their constitutional and civil rights. Despite a number of complaints to the Department, its protection has never been extended to the migrant cause.

Test litigation designed to challenge the growers' persistent denials of access pose a number of legal problems which are beyond the scope of this report Suffice to say that the case law is less than crystal clear and that legal proceedings are slow to come to

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24/ Of course, the analysis should also employ the constitutional and labor cases balancing tests which recognize and protect the valid interests of the grower.

fruition. Meanwhile, the migrants remain culturally isolated and virtually enslaved within the confines of the typical labor camp.

Not only is litigation in the area of access relatively new, but it must function within a system of many built-in handicaps. Primary among the problems faced by those who wish to develop a court case is that the migrants' transient life-style often renders any case legally or practically moot (i.e., there is no real controversy capable of judicial resolution). Far too often, by the time an attorney researches and documents the case, the migrant plaintiffs and often all the witnesses have packed up and moved on, thus drastically altering the situation that the attorney is requesting the court to remedy.

Second among the problems faced by anyone engaged in access litigation is that even the most rudimentary litigation requires at least three basic parties: first, a migrant farmworker who has requested help from a member of the outside community; secondly, a member of the outside community who has attempted to communicate with and/or render service to the migrant living in a grower's camp and has been denied; and thirdly, a camp owner who has denied entry to the camp, with or without assistance of some local official. To find the necessary interaction between the three parties is very difficult, and willing plaintiffs are particularly difficult to find. The individual who has been denied access is often a college student or a law student who has been volunteering for the summer. By the time a case begins to crystalize, he has returned to school and has become committed to other duties which preclude his participation in a court action. The migrant who has requested the help has almost always left the residential camp in question, and often cannot be located. If he can be located, he is often more than not reluctant to bring any type of action because he fears the repercussions such an action would inevitably bring, i.e., future jobs not only with that grower but often with many more growers in the same county or state. Furthermore, both the student and migrant parties' ways of life are also ill suited to the legal processes -- they are frequently unavailable for the many appearances in court and in the lawyers' offices which are characteristic of protracted litigation. The grower, who has denied access, is also a reluctant defendant. The moment that he becomes aware that such an action might be brought, he immediately contacts his lawyer who thereupon attempts to settle the matter or, failing that, enters into an interminable series of stalling tactics and compromise moves that sufficiently delay the case so as to render any ultimate decision all but meaningless.

We sadly conclude that there is no easy panacea for this problem. We do believe, however, that a clear Congressional committment, definitive action by the Justice Department and their state counterparts, and a willingness of the federal and state courts to use available expedited procedures and relax other procedural rules that work a particular injustice to the migrant cause would immediately better the lives of the migrants. Only in this manner may the more persistent problems of the migrant -- nutrition, health, education, housing, and employment -- be systematically attacked and the needs met. While these basic migrant problems have been clearly identified, and in some instances responsive programs have been devised, the needy and powerless beneficiaries cannot be reached until the vestiges of the growers' feudal power over his work force is eliminated. The first step must be the establishment and practical effectuation of the right to access.

THE SECRETARY OF HEALTH, EDUCATION, AND WELFARE
WASHINGTON, D. C. 20201

NOV 10 1970

Honorable Walter F. Mondale
Chairman
Subcommittee on Migratory Labor
Committee on Labor and Public Welfare
United States Senate
Washington, D. C. 20510

Dear Senator Mondale:

Thank you for your letter of September 22, in which you requested specific information regarding the effect of the 1969 amendment to the extension of the Migrant Health Act, as well as program comments on other issues related to migrant health.

The migrant health program has attempted in the past twelve months to do two specific things: 1) expand and improve the quality of health care being funded through our migrant health projects; and 2) formalize the relationship of consumer groups to the planning, development and implementation of projects. The newly-developed migrant health guidelines provide direction to this process. Specialists in health care administration, migrant project directors, and provider and consumer groups were consulted in the development of this document. These guidelines, a copy of which is enclosed, describe the criteria by which all projects will be judged, so that funding decisions will be based upon a well-established understanding between those attempting to provide services and those charged by legislation to administer these funds. The guidelines will be distributed in the near future.

The relationship of consumer representation on policy and advisory boards to project operations is outlined on Page 16 of this document. You will find the data requested on consumer control in the enclosed Table B.

We in the Department have a strong commitment to the concept of consumer involvement. It is apparent, however, from examination of Table B that the total number of projects having consumer control of policy boards is very small, and our experience with the operation of these boards is too limited to permit adequate evaluation at this time. We must concede, therefore, that our experiences in consumer participation can be classified only as experimental. We are trying to intensify training activities, both for consumer boards and for project personnel so that consumer involvement can be more effectively utilized. Therefore, your question on how effective these boards are must await the answer of time.

You also asked whether the Public Health Service has recently updated its State by State and county by county enumeration of agricultural workers in the United States. At the present time, updated figures are not available but the Community Health Service, which administers the migrant health programs, considers this effort top priority. Reliable data should be available by the end of the next migrant season.

Much thought has been given to the necessity for new legislation which would authorize additional funds for the migrant health program. Despite the fact that many of our migrant projects are underfunded, money itself is not the total answer. While the ultimate costs of providing health care for migrant and seasonal farmworkers may well approximate, or, indeed, even exceed $100 million as you suggest, funds of such magnitude probably could not be effectively administered at this time. The assumption of many persons in the past has been that the only reason migrants could not get health services was that they could not afford them. Today, however, we are meeting increasing problems in purchasing such care since the inadequacies in health facilities and the shortages in health manpower in rural areas have increased.

As a result of this problem, the migrant health program has changed its emphasis, putting a higher priority on funding projects which will increase the capacity of the health system in these rural areas to deliver care rather than compete for existing services. For example, we are encouraging projects to hire more paramedical personnel so that the very limited physician resources can be reserved for those duties requiring the unique skills of the physician. We are requiring projects to organize their services into family-centered health care to better utilize the time of the health professionals. Such reorientation of a program takes not only money, but time for planning and preparation.

Thus we see two major efforts at this time: the first, an orderly, planned expansion of the program along the lines indicated above; and the second, a redirection of present program priorities from projects which do not influence the system of care in rural areas to new or expanded projects which will improve the availability of care in areas having large numbers of migrants and seasonal farmworkers.

Finally, in your concluding paragraph, you ask what action our Department has taken in response to the conferees agreement (H.R. 91-618) "in opposition to program reorganization that destroyed the permanent and separate identity of the program." We recognize that the migrant worker and his family represent unique problems, but we also recognize that the migrant health program must have the benefit from the broader based knowledge of health economics and health care administration available within the Public Health Service. Many individuals who have long championed the cause of the migrant worker have, however, continued to stress the value of an identifiable program focus to preserve the emphasis on the national scope of the migrant health problem. Accordingly, we are establishing a Migrant Health Branch which will achieve this result without in any way diminishing the availability of other staff resources which have proved so valuable during the past two years.

I hope this information will be helpful to you. If there is any way we can be of further assistance, please let us know.

With best regards,

Sincerely,

Elliot L. Richardson

Secretary

TABLE A 1)

MIGRANT HEALTH PROJECTS
Active As Of October 1, 1970

Grant Number	Grantee	Project Director	Address	Telephone No.
ARIZONA				
29	Maricopa County Health Dept.	Raymond E. Kaufman, M.D.	1825 East Roosevelt Phoenix, Arizona 85001	602-258-6381
49	Pima County Health Dept.	Frederick J. Brady, M.D.	151 West Congress Street Tucson, Arizona 85701	602-623-0571
66	Yuma County Health Dept.	Edward V. Putnam, M.D.	145 Third Avenue Yuma, Arizona 85364	602-782-9221
111	Arizona State Dept. of Health	Mr. John H. Faulds	Arizona State Office Building 1624 West Adams Street Phoenix, Arizona 85007	602-271-4900
ARKANSAS				
50	Northwest Arkansas Area Migrant Committee	Mr. Bill E. Parette	34 West North Street Fayetteville, Arkansas 72701	501-443-9481
CALIFORNIA				
06	California State Dept. of Public Health	Miss Faustina Solis	2151 Berkeley Way Berkeley, California 94704	415-843-7900 x201
157	San Joaquin County Medical Society	Virgil Gianelli, M.D.	445 West Acacia Street Post Office Box 230 Stockton, California 95201	209-466-6781
158	Kern County Medical Society	Carrol W. Goss, M.D.	2603 G Street Bakersfield, California 93301	805-325-5051 x218

Grant Number	Grantee	Project Director	Address	Telephone No.
159	Santa Clara County Medical Society	Stanley A. Skillicorn, M.D.	700 Empey Way San Jose, California 95128	408-286-5050
178	University of California at Davis	Nemat Borhani, M.D.	School of Medicine Davis, California 95616	916-752-2793
188	Stanislaus County Medical Society	Robert W. Watson, M.D.	1125 13th St., P.O. Box 1755 Modesto, California	
198	Kern County Liberation Movement Health Committee	Robert Isman, D.D.S. Interim Project Director	933 Niles Street Bakersfield, California 93305	805-323-7811
209	Fresno County Economic Opportunities Committee	Richard Noble, M.D. Interim Project Director	Room 328, Main P.O.Bldg. 2309 Tulare Street Fresno, California 93721	209-485-8340
219	Casa De Amistad	Ventura Huerta	Palm and J Streets P.O. Box 1258 Brawley, California 92227	714-344-3341
COLORADO				
09	Colorado State Dept. of Public Health	Robert A. Downs, D.D.S.	4210 East 11th Avenue Denver, Colorado 80220	303-388-6111
217	Foundation for Urban and Neighborhood Development	Sam Burns	1889 York Street Denver, Colorado 80206	
DELAWARE				
83	Delaware State Council of Churches	Rev. Samuel A. Snyder, Jr.	217 North Bradford Street Dover, Delaware 19901	302-736-6919

Grant Number	Grantee	Project Director	Address	Telephone No.
DISTRICT OF COLUMBIA				
211	National Migrant Worker Council Conference of Major Superiors of Women	Sister Mary Maurita Sengelaub, RSM	Dept. of Health Affairs, USCC 1312 Massachusetts Avenue, N.W. Washington, D. C. 20005	
FLORIDA				
18	Dept. of Health and Rehabilitative Services	James B. Stapleton, M.D. Chief, Bureau Local Health Services	P.O. Box 210 Jacksonville, Florida 32201	904-354-3961 x336
11	Palm Beach County Health Dept.	C. L. Brumback, M.D.	826 Evernia Street, P.O. Box 29 West Palm Beach, Florida 33402	305-354-3961
199	Broward County Health Dept.	Paul W. Hughes, M.D.	P.O. Box 1021 Fort Lauderdale, Florida 33302	305-535-6311
200	Collier County Health Dept.	Charles F. Bradley, M.D.	P.O. Box 477 Naples, Florida 33940	813-649-1962
201	Highlands County Health Dept.	Peter G. Kroll, M.D. (Acting)	Courthouse Annex Sebring, Florida 33870	813-385-0849
202	Glades-Hendry County Health Dept.	Peter G. Kroll, M.D. (Acting)	P.O. Box 278 LaBelle, Florida 33935	813-675-3721
203	Lee County Health Dept.	Joseph W. Lawrence, M.D.	P.O. Box 1226 Fort Myers, Florida 33902	813-335-1146
204	Orange County Health Dept.	Wilfred N. Sisk, M.D.	P.O. Box 3187 Orlando, Florida 32802	305-241-4311

Grant Number	Grantee	Project Director	Address	Telephone No.
205	Putnam-Flager County Health Dept.	E. Henry King, M.D.	P.O. Box Drawer 1070 Palatka, Florida 32077	904-325-7531
206	Saint Lucie County Health Dept.	Niell D. Miller, M.D.	P.O. Box 580 Fort Pierce, Florida 33451	305-461-5350
207	Sarasota County Health Dept.	David L. Crane, M.D.	P.O. Box 2658 Sarasota, Florida 33578	813-955-8101
208	Seminole County Health Dept.	Peter G. Kroll, M.D. (Acting)	P.O. Box 1856 Stanford, Florida 32771	305-322-2724
212	Greater Miami Coalition	Dr. Lynn Carmichael	904 Southwest Second Avenue Miami, Florida 33130	305-350-6604
ILLINOIS				
150	Princeville Migrant Council	Mrs. Ruth S. Holmes	Martin Road Edelstein, Illinois 61526	309-385-4370 o 309-385-4994
151	Jones Memorial Community Center	E. G. Wygant, M.D.	152 West 14th Street Chicago Heights, Illinois 60411	312-756-7000
153	Migrant Ministry Committee of the Council of Churches of Scott & Rock Island Counties	Rev. Donald F. Bautz	639 38th Street Rock Island, Illinois 61201	309-786-3922
173	Lee-Ogle Migrant Council	Mrs. Guy Mosteller and	1060 North Main Street Rochelle, Illinois 61068	815-562-4870
		Mrs. William Woods	Route #1 Paw Paw, Illinois 61353	815-562-3169

Grant Number	Grantee	Project Director	Address	Telephone No.
INDIANA				
179	Associated Migrant Opportunity Services, Inc.	Mrs. Teresa Ponce	806 East 38th Street Indianapolis, Indiana 46205	317-925-9809
IOWA				
23	Muscatine Migrant Committee	Miss Margaret Murphy	218 West Second Street Muscatine, Iowa 52761	319-264-1155
116	Migrant Action Program	Mr. Jaime Duran	Box 778 Mason City, Iowa 50401	515-423-7572
KANSAS				
64	Kansas State Dept. of Health	Patricia Schloesser, M.D.	State Office Building Topeka, Kansas	913-296-3507
74	Kansas City-Wyandotte County Health Dept.	N. G. Walker, M.D.	1014 Armstrong Avenue Kansas City, Kansas 66102	913-321-4803
LOUISIANA				
54	Louisiana State Dept. of Health	John B. Stotler, M.D.	P.O. Box 278 Amite, Louisiana 70422	504-527-2611
MARYLAND				
163	Wicomico County Health Dept.	William C. Fritz, M.D.	Watson Memorial Building West Locust Street Salisbury, Maryland 21801	301-742-1141
155	Worcester County Community Action Committee, Inc.	Mr. Richard L. Davis	P.O. Box 67 Snow Hill, Maryland 21863	301-632-2160

Grant Number	Grantee	Project Director	Address	Telephone No.
MASSACHUSETTS				
68	Massachusetts Health Research Institute, Inc.	Dorothy Worth, M.D.	488 Tremont Street Boston, Massachusetts 02184	617-727-2642
MICHIGAN				
31	Ottawa County Health Dept.	Mr. John H. Wyma	508 Grant Street Grand Haven, Michigan 49417	616-842-0100
79	Monroe County Health Dept.	Walter A. Meier, M.D.	Courthouse Monroe, Michigan 48161	313-241-9434
107	Berrien County Health Dept.	Robert P. Locey, M.D.	Courthouse St. Joseph, Michigan 49085	616-983-7111 x261 616-926-6159 (Med. Center)
112	Grand Traverse-Leelanau-Benzie County Health Dept.-- in cooperation with Grand Traverse Migrant Labor Council	Mr. William Witt	c/o Grand Traverse Medical Facility Traverse City, Michigan 49684	616-947-5606
131	Manistee-Mason District Health Dept.	Mr. William W. Moond	Courthouse Manistee, Michigan 49660	616-843-3994
138	District Health Dept. #4	William F. Jackson, M.D.	1400 Larke Avenue Rogers City, Michigan 49779	517-734-2042
149	Benzie Migrant Ministry Committee	Mrs. Marvel Papineau	1921 Eden Hill Road Beulah, Michigan 49617	616-882-4108

Grant Number	Grantee	Project Director	Address	Telephone No.
210	East Central Michigan Health Service	Robert L. Loftin, M.D.	1501 North Michigan Avenue Saginaw, Michigan 48601	517-755-6544
MINNESOTA				
67	Minnesota Dept. of Health	D. S. Fleming, M.D.	University Campus Minneapolis, Minnesota 55440	612-339-7751
MISSOURI				
104	Delmo Housing Corp.	Mr. Alex Cooper	Box 354 Lilbourn, Missouri 63862	314-688-2565
MONTANA				
218	Montana Dept. of Health	Ilo J. Kailey	Cogswell Building Helena, Montana	
NEBRASKA				
88	Nebraska Dept. of Health	T. R. Dappen	P.O. Box 94757 Capitol Building Lincoln, Nebraska 68509	402-477-5211
NEVADA				
133	Clark County District Health Dept.	Otto Ravenholt, M.D.	625 Shadow Lane Las Vegas, Nevada 89106	702-385-1291 x201
NEW JERSEY				
08	New Jersey State Dept. of Health	Mr. Thomas B. Gilbert	Health and Agricultural Bldg. John Fitch Plaza, P.O. Box 1540 Trenton, New Jersey 08625	609-292-4033

Grant Number	Grantee	Project Director	Address	Telephone No.
118	Board of Chosen Freeholders of Cumberland County	William P. Doherty, V.M.D.	Cumberland County Courthouse Bridgeton, New Jersey 08302	609-451-8000
181	Board of Chosen Freeholders of Salem County	Laurence P. Devlin, M.D.	Courthouse 92 Market Street Salem, New Jersey 08079	609-769-2126
NEW MEXICO				
15	Las Cruces Committee on Migrant Ministry	Sheila Sachs, R.N.	P.O. Box 91 924 W. Picacho Las Cruces, New Mexico 88001	505-524-3571
134	New Mexico Dept. of Health and Social Services-Dist. I	Jan P. Voute, M.D.	P.O. Box 4397 Santa Fe County Health Center 605 Letrado Street Santa Fe, New Mexico 87501	505-982-3801
154	New Mexico Dept. of Health and Social Services-Dist. X	Bettie Mc Clintock, M.D.	Curry County Health Dept. Courthouse Clovis, New Mexico 88101	505-763-5583
187	New Mexico Dept. of Health and Social Services-Dist. V	Jan P. Voute, M.D. (Acting)	P.O. Box 1506 Las Vegas, New Mexico 87701	505-425-9456
NEW YORK				
38	New York State Dept. of Health	Arthur G. Baker, M.D.	Utica District Office 1512 Genesee Street Utica, New York 13502	315-732-5137
60	Suffolk County Dept. of Health	Robert Spect, R.N.	Suffolk County Center Riverhead, Long Island New York 11901	516-727-4700 x357

Grant Number	Grantee	Project Director	Address	Telephone No.
103	University of Rochester	James H. Haggarty, M.D.	River Campus Station Rochester, New York 14627	716-473-4400 x3271
125	Ulster County Dept. of Health	Vernon B. Link, M.D.	244 Fair Street Kingston, New York 12401	914-331-9300 x330
135	Migrant Committee of the Warwick Valley Council of Churches	Mrs. Valerie Maize	South Street and Second Warwick, New York 10990	914-986-1725
148	New York State Health Dept.	Arthur G. Baker, M.D.	845 Central Avenue Albany, New York 12206	518-457-2133
175	Secular Mission Diocese of Rochester	Father Timothy Weider	Project REACH Perkinsville, New York 14529	
176	Wayne County Public Health Committee	Rev. Stuart J. Mitchell	Wayne County Public Health Nursing Office Pearl Street Lyons, New York 14486	315-946-9324 clinic 315-483-4681
NORTH CAROLINA				
28	Henderson County Migrant Council, Inc.	Mrs. Frank B. Burson, P.H.N.	P.O. Box 65 Hendersonville, N. C. 28739	704-692-2815
56	North Carolina State Board of Health	Ronald Levine, M.D.	225 N. McDowell Street P.O. Box 2091 Raleigh, North Carolina 27602	919-829-3131
57	District Health Dept.	Harold L. White, Ph.D.	Elizabeth City, North Carolina 27909	919-335-5429
122	Community Action Council, Inc.	Caroline H. Callison, M.D.	Sampson County Health Dept. Clinton, North Carolina 28328	919-592-6177

Grant Number	Grantee	Project Director	Address	Telephone No.
191	Wilson County Health Dept.	Joseph L. Campbell, M.D.	Goldsboro Street Extension Wilson, North Carolina 27896	
OHIO				
21	Sandusky County-Fremont City	William J. Boswell, M.D.	Courthouse Fremont, Ohio 43420	419-334-2757
35	Lucas County Health Dept.	Charlotte Richards, M.P.H.	416 North Erie Street Toledo, Ohio 43624	419-248-5911
36	Ohio Dept. of Health	T. A. Gardner, M.D.	450 East Town Street, P.O. Box 118 Columbus, Ohio 43216	614-469-4364
61	Putnam County General Health District	Milo B. Rice, M.D.	Court House Ottawa, Ohio 45875	419-523-5608
78	Darke County General Health District	Giles Wolverton, M.D.	Courthouse Greenville, Ohio 45331	513-548-4196
126	Ottawa County Ministry to Migrants, Inc.	Rev. Donald Mohr	216 Church Street Oak Harbor, Ohio 43449	419-897-7081
136	Hartville Migrant Council, Inc.	Mrs. Florence Wyandt	6134 Portage Street, N.W. N. Canton, Ohio	216-499-8160
162	Wood County Health Dept.	James A. Coy, M.P.H.	541 West Wooster Street Bowling Green, Ohio 43402	419-353-5081
OKLAHOMA				
59	State Dept. of Health	Forest R. Brown, M.D.	3400 North Eastern Oklahoma City, Oklahoma 73105	405-427-0034

Grant Number	Grantee	Project Director	Address	Telephone No.
OREGON				
05	Oregon State Board of Health	Hugh Dierker, M.D.	1400 Southwest Fifth Avenue Portland, Oregon 97201	503-226-2161
PENNSYLVANIA				
33	Pennsylvania Dept. of Health	A. L. Chapman, M.D.	P.O. Box 90 Harrisburg, Pennsylvania 17120	717-787-6967
PUERTO RICO				
58	University of Puerto Rico	Ruben Nazario, M.D.	School of Medicine San Juan, Puerto Rico 00905	772-0940
183	Aguadilla Public Health Corp.	Ramon Ferreris, M.D.	Box 485 Aguadilla, Puerto Rico 00603	
SOUTH CAROLINA				
26	South Carolina State Board of Health (Charleston County)	Cecil F. Jacobs, M.D.	J. Marion Sims Building Columbia, South Carolina 29201	803-723-9251
121	South Carolina State Board of Health (Beaufort County)	H. Parker Jones, M.D.	J. Marion Sims Building Columbia, South Carolina 29201	803-524-3446
TEXAS				
03	Texas State Dept. of Health	Carl F. Moore, Jr., M.D.	1100 West 49th Street Austin, Texas 78756	512-454-3781 x396
37	Plainview-Hale County Health Dept.	Gerald W. Wagner, M.D.	10th and Ash Street P.O. Box 1738 Plainview, Texas 79072	806-293-1359

Grant Number	Grantee	Project Director	Address	Telephone No.
TEXAS cont.				
42	Laredo-Webb County Health Dept.	J. L. Gonzalez	400 Arkansas Avenue P. O. Box 591 Laredo, Texas 78040	512-722-2481
97	Cameron County Health Dept.	John R. Copenhaver, M.D.	186 North Sam Houston Boulevard San Benito, Texas 78586	512-399-1356
99	Jim Wells County Commissioners' Court	Mr. Gonzalo Trevino	Jim Wells County Courthouse 200 North Almond Street Alice, Texas 78332	512-664-5582
100	Zapata County Commissioners' Court	Hon. Pedro Ramirez, Jr.	P.O. Box 875 Zapata, Texas 78076	512-765-4342
108	Crosby County Commissioners Court	Mr. T. J. Taylor	P.O. Box 462 Crosbyton, Texas 79322	806-675-2382
109	Greenbelt Medical Society	Jack F. Fox and	801 Commerce Street P.O. Box 70 Childress, Texas 79201	817-937-3636
		Harold R. Stevenson, M.D.	Hall County Operation 1645 North 18th Street Memphis, Texas 79245	817-259-3516
115	Gonzales County Medical Society	Mrs. Ruth N. Shelby, R.N.	Suite 8 409-½ St. George Street Gonzales, Texas 78629	512-672-6079

Grant Number	Grantee	Project Director	Address	Telephone No.
TEXAS cont.				
117	Hidalgo County Medical Society	John R. Copenhaver, M.D.	1425 South Ninth Street Edinburg, Texas 78539	512-383-6221
119	Hudspeth County Commissioners' Court	Hon. Tom H. Neely	P.O. Box 68 Hudspeth County Courthouse Sierra Blanca, Texas 79851	915-369-2321
120	LaSalle County Commissioners' Court	J. M. Barton, M.D.	105 South Stewart Street Cotulla, Texas 78014	512-879-2342
128	Del Rio-Val Verde County Health Dept.	Mr. Lewis G. Owens	200 Bridge Street Del Rio, Texas 78840	512-775-5985
139	City Council, City of Littlefield	Mr. Pat Bradley	P.O. Box 1267 Littlefield, Texas 79339	806-385-4411
140	DeLeon Municipal Hospital Board	F. A. Eisenrich, M.D.	407 South Texas Avenue P.O. Box 30 DeLeon, Texas 76444	817-893-2332
141	Floyd County Commissioners	Hon. J. K. Holmes	Floyd County Courthouse Floydada, Texas 79235	806-983-2244
142	Jim Hogg County Commissioners' Court	Hon. H. T. Martinez	County Courthouse Hebbronville, Texas 78361	512-527-3015
146	Live Oak County Health Dept.	G. W. Sansom, M.D.	P.O. Box 28 Courthouse George West, Texas 78022	512-449-2201
147	San Marcos-Hays County Health Dept.	B. M. Primer, Sr., M.D.	Courthouse - Second Floor San Marcos, Texas 78666	512-392-5831

Grant Number	Grantee	Project Director	Address	Telephone No.
TEXAS cont.				
160	Starr County Health Dept.	John R. Copenhaver, M.D..	1425 South Ninth Street Edinburg, Texas 78539	512-383-6221
174	Cameron County Health Dept.	John R. Copenhaver, M.D.	186 North Sam Houston Blvd. San Benito, Texas 78539	512-399-1356
213	Bexar County Migrant Farm Workers Association	Joe L. De Los Santos	1147-A Cupples Road San Antonio, Texas 78226	
214	Deaf Smith County Public Health Clinic, Inc.	Gerald G. Payne, M.D.	902 East 4th Hereford, Texas 79045	
215	San Patricio County Committee on Youth Education and Job Opportunities		111 North Odem Building Sinton, Texas 78387	
UTAH				
98	Utah State Dept. of Health	Taira Fukushima, M.D.	44 Medical Drive Salt Lake City, Utah 84113	801-322-2431
VIRGINIA				
41	Division of Local Health Services	R. W. Moseley, M.D.	State Department of Health Richmond, Virginia 23219	703-644-4111
WASHINGTON				
145	Washington State Dept. of Health	John A. Beare, M.D.	Public Health Building Olympia, Washington 98501	206-352-1667
132	Bellingham-Whatcom County District Health Dept.	Philip H. Jones, M.D.	509 Girard Street Bellingham, Washington 98225	206-733-9520

Grant Number	Grantee	Project Director	Address	Telephone No.
144	Skagit County Health Dept.	J. K. Neils, M.D.	Courthouse Mt. Vernon, Washington 98273	206-336-2106
220	United Farm Workers Service Center Association	Mr. Ray Esparza	P.O. Box 655 Toppenish, Washington 98948	
WEST VIRGINIA				
123	District #6 Health Dept.	Jean B. Lucas, M.D.	209 East King Street Martinsburg, West Virginia 25401	304-263-5131
WISCONSIN				
75	Catholic Diocese of Madison	Mrs. Clayton S. Mills	Guadalupe House, Elm Acre Endeavor, Wisconsin 53930	608-587-2033 608-587-2735 (clinic)
129	St. Joseph Hospital	Mrs. Shirley Ghilardi, RT	615 West Mackie Beaver Dam, Wisconsin 53916	414-885-6817
137	The Industrial Labor and Human Relations Commission of Wisconsin	Mr. Roger Ostrem	Hill Farms State Office Bldg. Madison, Wisconsin 53701	608-266-3131
169	Catholic Diocese of Green Bay	Mr. Walter Brudnowski	Route 2 Neshkoro, Wisconsin 54960	414-293-4937

TABLE B

MIGRANT HEALTH PROJECTS

Amounts Obligated, Classification of Services, and Consumer Involvement

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services[1]	Status of Project	Consumer Boards Established: Type of Board	Membership: No. of Consumers	Membership: No. of Non-consumers
ARIZONA								
29	Maricopa County Migrant Family Health Project	$ 46,082[2]	$ 248,774	B	Active	No Board established		
49	Assistance to Pima County Migrants	7,470	15,911	D	Active	No Board established		
66	Yuma County Migrant Health Project	85,540	187,152	B	Active	No Board established		
94	Pinal County Migrant Family Health Project	53,555	18,660[2]	N.A.	Terminated	----	----	----
111	Arizona State Migrant Health Program	55,341	93,828	3/	Active	No Board established		
ARKANSAS								
50	Northwest Arkansas Area Migrant Committee Project	17,148	33,530	B	Active	No Board established		
CALIFORNIA								
06	Health Program for Farm Workers' Families in California	958,997	1,230,418	4/	Active		5/	
157	Mobile Health Services for Migrant Agricultural Families	128,304	172,095	C	Active	No Board established		

1/ See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services 1/	Status of Project	Consumer Boards Established: Type of Board	Consumer Boards Established: Membership: No. of Consumers	Consumer Boards Established: Membership: No. of Non-consumers
CALIFORNIA CONT.								
158	Kern County Clinic for Migrant Workers	$ 47,791	$ 47,767	C	Active	No Board established		
159	South County Migrant Clinic	40,420	64,755	C	Active	No Board established		
178	Yolo County Migrant Workers' Comprehensive Health Program	0	103,606	C	Active	Advisory	Not completed	
188	Comprehensive Health Services for Migrant Workers and Families	0	53,814	D	Active	No Board established		
198	Kern County Migrant Health Program	0	391,500	A	Active	Policy	19	7
209	Orange Cove Family Health Clinic	0	358,658	A	Active	Policy	8	5
219	Clinica Salubridad De Campesinos	0	375,001	A	Active	Policy	8	4
COLORADO								
09	Colorado State Migrant Health Program	159,935	185,466	6/	Active	No Board established		
217	Plan De Salud Del Valle	0	400,990	A	Active	Policy	Not completed	

1/ See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

TABLE B 3

		Amount Obligated				Consumer Boards Established		
							Membership	
Number	Project Title	FY69	FY70	Services 1/	Status of Project	Type of Board	No. of Consumers	No. of Non-consumers
CONNECTICUT								
82	Migrant Farm Labor Sanitation Program	$ 5,514	$ 0	N.A.	Terminated	----	----	----
DELAWARE								
83	Delaware Migrant Health Project	26,135	26,258	C	Active	No Board established		
DISTRICT OF COLUMBIA								
211	East Coast Migrant Health Project	0	130,056	7/	Active	No Board established		
FLORIDA								
11	Comprehensive Health Services for Agricultural Migrants	221,894	469,582	B	Active	Policy	12	6
34	Comprehensive Health Care for Migrant Farmworkers	124,998	98,938 2/	N.A.	Terminated	----	----	----
18	Statewide Program of Health Services for Migrant Farmworkers	676,805	83,679 8/	G	Active	No Board established		
199	Comprehensive Health Services for Migrants and Dependents	8/	73,135	C	Active	No Board established		

1/ See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

Number	Project Title	Amount Obligated		Services[1]	Status of Project	Consumer Boards Established		
							Membership	
		FY69	FY70			Type of Board	No. of Consumers	No. of Non-consumers
FLORIDA CONT.								
200	Comprehensive Health Services for Migrants and Dependents	$ [8]	$ 127,550	D	Active	No Board established		
201	Comprehensive Health Services for Migrants and Dependents	[8]	11,720	D	Active	No Board established		
202	Comprehensive Health Services for Migrants and Dependents	[8]	52,181	D	Active	No Board established		
203	Comprehensive Health Services for Migrants and Dependents	[8]	66,419	C	Active	Advisory	12	4
204	Comprehensive Health Services for Migrants and Dependents	[8]	43,072	D	Active	No Board established		
205	Comprehensive Health Services for Agricultural Migrants	[8]	16,737	C	Active	Advisory	8	7
206	Comprehensive Health Services for Agricultural Migrants	[8]	37,498	C	Active	No Board established		
207	Comprehensive Health Services for Agricultural Migrants	[8]	27,281	C	Active	Advisory	5	11
208	Comprehensive Health Services for Agricultural Migrants	[8]	53,795	D	Active	No Board established		

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[1] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

		Amount Obligated				Consumer Boards Established		
					Status		Membership	
Number	Project Title	FY69	FY70	Services[1/]	of Project	Type of Board	No. of Consumers	No. of Non-consumers
FLORIDA CONT.								
212	Migrant Family Health Center of Homestead	$ 0	$ 505,290	A	Active	Policy	10	5
IDAHO								
124	Idaho State Migrant Health Services	29,224	0	N.A.	Terminated	----	----	----
ILLINOIS								
105	Program for Agricultural Migrant Families	16,063	7,000[2/]	N.A.	Terminated	----	----	----
150	Princeville Migrant Health Services	2,315	3,478	C	Active	No Board established		
151	Jones Memorial Migrant Health Clinic	16,652	23,309	B	Active	No Board established		
153	Rock Island, Mercer Migrant Family Health Service	5,343	12,148	B	Active	No Board established		
172	Hoopeston, Illinois Migrant Health Project	6,400	0	N.A.	Terminated	----	----	----
173	Limited Health Services for Migrant Workers and Families	9,131	10,940	B	Active	No Board established		

[1/] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

		Amount Obligated				Consumer Boards Established		
							Membership	
Number	Project Title	FY69	FY70	Services[1]	Status of Project	Type of Board	No. of Consumers	No. of Non-consumers
INDIANA								
20	Indiana State Migrant Health Program	42,274	0	N.A.	Terminated	----	----	----
179	Lake County Migrant Health Services	10,402	1,879[10]	C	Active	No Board established		
IOWA								
23	Muscatine Area Migrant Health Services	21,802	28,993	B	Active	Advisory	8	6
116	Health Services for Migrants in Iowa	44,980	45,772	B	Active	Advisory	13	12
KANSAS								
64	Health Services for Migrant Families in Western Kansas	45,696	137,881	B	Active	Advisory	10	4
74	Health Services for Migrant Families in Wyandotte County	44,016	49,951	B	Active	Advisory	12	6
LOUISIANA								
54	Health Services for Migratory Workers - Tangipahoa Parish	20,135	19,896	C	Active	No Board established		

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[1] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

TABLE B 7

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services[1]	Status of Project	Consumer Boards Established Type of Board	Membership No. of Consumers	Membership No. of Non-consumers
MARYLAND								
155	Worcester County Migrant Health Services	$ 7,702	$ 11,647	D	Active	No Board established		
163	Wicomico County Migrant Health Project	6,459	14,226	D	Active	No Board established		
167	Frederick County Migrant Health Project	3,000	1,681	N.A.	Terminated	----	----	----
MASSACHUSETTS								
68	Massachusetts Migrant Health Program	0[11]	145,863	G&C	Active	(2) Advisory	10/8	0/0
MICHIGAN								
30	Health Services for Migrant Families	28,923	6,530[2]	N.A.	Terminated	----	----	----
31	Cooperative Migrant Project	0[11]	5,080	B	Active	No Board established		
79	Migrant Family Health Service	29,761	18,066	B	Active	No Board established		
91	Agricultural Labor Camp Sanitation Program	19,029[2]	0	N.A.	Terminated	----	----	----
107	Tri-County Migrant Health Program	258,705	429,613	B	Active	Advisory	6	8

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[1] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

		Amount Obligated				Consumer Boards Established	Membership	
Number	Project Title	FY69	FY70	Services[1/]	Status of Project	Type of Board	No. of Consumers	No. of Non-consumers
MICHIGAN CONT.								
112	Comprehensive Care for Migrant Population	$ 37,781	$ 68,364	B	Active	Advisory	2	5
131	Migrant Family Medical Care Program	18,866	36,139	B	Active	No Board established		
138	Migrant Family Health Program	10,974	23,341	B	Active	No Board established		
149	Migrant Family Health Project	30,591	39,454	E	Active	No Board established		
210	Migrant Health Program - Saginaw, Bay, Midland, Arenac, Gratiot, Isabella, Tuscola Counties	75,000	356,105	B	Active	Advisory	7	7
MINNESOTA								
67	Health and Sanitation Services for Migrant Families in Minnesota	80,937	117,505	D	Active	No Board established		
MISSOURI								
104	Family Health Services for Home-Based Migrants in Southeast Missouri	69,800	73,339	D	Active	Advisory	2[9/]	19

1/ See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

TABLE B

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services[1/]	Status of Project	Consumer Boards Established: Type of Board	Membership: No. of Consumers	Membership: No. of Non-consumers
MONTANA								
218	Migrant Health Program for Yellowstone Valley	$ 0	$ 15,800	G&D	Active	No Board established		
NEBRASKA								
88	Health Services for Migrant Families in Nebraska	41,938	56,553	B	Active	Advisory	3[9/]	5
NEVADA								
133	Moapa Valley Migrant Health Program	35,997	25,688	D	Active	No Board established		
NEW JERSEY								
08	Health Services for Migrants	143,837	123,718	G&C	Active	Advisory	12	10
118	Migrant Health Services, Cumberland County	53,764	70,464	B	Active	Advisory	6	5
181	Migrant Health Program, Salem County, New Jersey	0	53,028	E	Active	Advisory	6	5

[1/] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

TABLE B

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services[1]	Status of Project	Consumer Boards Established Type of Board	Membership No. of Consumers	Membership No. of Non-consumers
NEW MEXICO								
15	Las Cruces Migrant Health Project	$ 30,525	$ 44,320	B	Active	No Board established		
134	Migrant Health Project - Health Districts 1 and 5	155,891	30,265[2]	B	Active	No Board established		
154	New Mexico Migrant Health Project, Health District 10	29,412	37,091	B	Active	No Board established		
187	Migrant Health Project - Health District 5	54,785	72,791	B	Active	No Board established		
NEW YORK								
38	Family Services Clinics	2,246	5,300	E	Active	No Board established		
60	Suffolk County Migrant Health Project	48,951	55,595	C	Active	Advisory	Not completed	
103	Monroe County Migrant Project	2,000[2]	223,863	B	Active	(2) Advisory	10/3	4/2
125	New Paltz Migrant Health Project	23,448	31,814	E	Active	Advisory	6	2
135	Orange County Migrant Health Project	33,843	59,404	B	Active	Advisory	13	8
148	Migrant Health Services Coordination Project	25,671	68,217	G	Active	No Board established		

1/ See Attachment I - **Classification of Organization and Scope of Services in Migrant Health Projects**
All other footnotes - **See Attachment II**

TABLE B 11

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services[1/]	Status of Project	Consumer Boards Established: Type of Board	Membership: No. of Consumers	Membership: No. of Non-consumers
NEW YORK CONT.								
175	Multi-County REACH Migrant Health Project	$ 0	$ 66,872	B	Active	Advisory	6	4
176	Wayne County Migrant Health Project	0	338,148	A	Active	Advisory	11	10
NORTH CAROLINA								
27	Carteret Area Mobile Migrant Clinic	0[11/]	2,824[2/]	N.A.	Terminated	----	----	----
28	Henderson County Migrant Family Health Service	32,108	40,391	C	Active	Advisory	9	3
56	North Carolina State Migrant Health Project	21,582	41,154	G	Active	No Board established		
57	Albemarle Migrant Health Project	28,601	31,106	C	Active	Advisory	2	14
122	Sampson Migrant Health Project	20,623	18,765	C	Active	Advisory	8	3
191	Wilson-Greene Migrant Health Project	0	52,892	C	Active	No Board established		
OHIO								
21	Sandusky County Migrant Health Services Program	52,304	56,615	B	Active	No Board established		

[1/] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

TABLE B 12

Number	Project Title	Amount Obligated FY69	FY70	Services[1]	Status of Project	Consumer Boards Established Type of Board	Membership No. of Consumers	No. of Non-consumers
OHIO CONT.								
24	Environmental Health Project (Migrants)	$ 55,685	$ 56,603	N.A.	Terminated	----	----	----
35	Family Health Project for Migrants	23,273	33,966	B	Active	No Board established		
36	Health Aide, Nursing, and Nutrition Consultation Project	52,580[2]	307,320	B	Active	No Board established		
61	Migrant Labor Family Care Program	29,000	42,734	B	Active	No Board established		
78	Migrant Health Clinic and Nursing Project	14,047	18,737	B	Active	No Board established		
126	Ottawa County Migrant Family Health Clinic	20,221	30,999	B	Active	No Board established		
136	Migrant Health Project and Dental Care Program	22,021	17,066	B	Active	No Board established		
162	Comprehensive Family Health Program for Migrants	24,920	64,913	B	Active	No Board established		
OKLAHOMA								
59	Health Service for Migrant Labor Families	48,167	53,281	D	Active	No Board established		

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[1] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

TABLE B 13

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services[1]	Status of Project	Consumer Boards Established: Type of Board	Membership: No. of Consumers	Membership: No. of Non-consumers
OREGON								
05	Health Services for Migrant Farm Labor	$ 0[11]	$ 493,700	[6]	Active	[12]		
PENNSYLVANIA								
33	Health and Medical Services for Migrants	14,138[2]	133,377	B	Active	No Board established		
PUERTO RICO								
58	Health Project for Migrant Workers	145,253	192,039	A	Active	(2) Advisory	7/9	6/4
183	Aguadilla Migrant Health Program Project	0	125,000	A	Active	No Board established		
SOUTH CAROLINA								
26	Health Services for Migratory Families - Charleston County	64,374	72,268	C	Active	No Board established		
121	Comprehensive Health Program for Migrants - Beaufort County, South Carolina	35,450	35,125	B	Active	No Board established		

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[1] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

TABLE B 14

Number	Project Title	Amount Obligated		Services[1]	Status of Project	Consumer Boards Established		
							Membership	
		FY69	FY70			Type of Board	No. of Consumers	No. of Non-consumers
TEXAS								
03	Texas State Migratory Labor Health Project	$ 241,709	$ 226,700	G	Active	No Board established		
37	Hale County Migrant Health Service	67,336	72,468	D	Active	Advisory	Not completed	
42	Laredo-Webb County Family Health Service	81,311	108,685	B	Active	Advisory	Not completed	
44	Southwestern Texas Migrant Project	19,585	17,563	N.A.	Terminated	----	----	----
46	Lubbock County Migrant Health Program	5,480[2]	0	N.A.	Terminated	----	----	----
95	Calhoun County Migrant Health Program	16,820	8,863	N.A.	Terminated	----	----	----
97	Cameron County Migrant Health Project	272,625	254,260	D	Active	Advisory	8	7
99	Jim Wells County Migrant Health Project	50,817	44,898	B	Active	Advisory	5	4
100	Zapata County Migrant Health Project	47,968	51,140	B	Active	No Board established		
108	Crosby County Migrant Health Project	33,819	42,809	D	Active	No Board established		
109	Greenbelt Medical Society Migrant Health Project	24,400	23,546	D	Active	No Board established		

1/ See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services[1/]	Status of Project	Consumer Boards Established Type of Board	Membership No. of Consumers	Membership No. of Non-consumers
TEXAS CONT.								
110	Spur-Dickens County Health Project	$ 14,330	$ 7,459	N.A.	Terminated	----	----	----
113	Yoakum County Migrant Health Project	25,095	31,514	N.A.	Terminated	----	----	----
114	Goliad County Migrant Health Project	36,034	14,707[2/]	N.A.	Terminated	----	----	----
115	Gonzales County Migrant Health Project	67,160	94,911	B	Active	No Board established		
117	Hidalgo County Migrant Health Project	180,186	391,549	D	Active	Advisory	8	7
119	Hudspeth County-Dell City Migrant Health Project	43,233	49,635	B	Active	No Board established		
120	LaSalle County Migrant Health Project	50,463	49,617	D	Active	No Board established		
128	Del Rio-Val Verde County Migrant Health Project	9,399[2/]	47,993	B	Active	No Board established		
139	Littlefield-Lamb County Migrant Health Project	32,805	42,542	D	Active	No Board established		
140	Leon Valley Migrant Health Project	37,517	70,044	B	Active	No Board established		
141	Floyd County Migrant Health Project	40,733	53,048	D	Active	No Board established		
142	Jim Hogg County Commissioners' Court Migrant Health Project	18,888	21,713	B	Active	No Board established		

1/ See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services 1/	Status of Project	Consumer Boards Established: Type of Board	Membership: No. of Consumers	Membership: No. of Non-consumers
TEXAS CONT.								
143	Castro County Migrant Health Project	$ 51,279	$ 21,130	N.A.	Terminated	----	----	----
146	Live Oak County Migrant Health Project	16,596	18,594	D	Active	No Board established		
147	San Marcos-Hays County Migrant Health Project	25,108	33,504	D	Active	No Board established		
160	Starr County Migrant Health Project	60,761	79,511	B	Active	No Board established		
174	Willacy County Migrant Health Project	51,105	53,618	D	Active	Advisory	8	7
213	Bexar County Migrant Farm Workers Association Health Project	0	160,000	B	Active	Advisory	14	7
214	Deaf Smith County Migrant Health Project	0	79,726	B	Active	Advisory	Not completed	
215	San Patricio Migrant Health Center	0	161,682	A	Active	Advisory	8	7
UTAH								
98	Utah Migrant Health Service	42,633	50,633	D	Active	No Board established		

1/ See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

TABLE B 17

Number	Project Title	Amount Obligated		Services[1]	Status of Project	Consumer Boards Established		
							Membership	
		FY69	FY70			Type of Board	No. of Consumers	No. of Non-consumers
VIRGINIA								
41	Virginia State Migrant Health Project	$ 123,431	$ 30,887[10]	B	Active	Advisory	8	8
WASHINGTON								
132	Whatcom County Migrant Health Health Program	18,700	22,475	C	Active	No Board established		
144	Skagit County Migrant Health Project	71,246	93,032	C	Active	No Board established		
145	Washington State Migrant Health Project	151,571	171,007	[6]	Active	[13]		
220	Farmworkers Family Health Center	0	369,750	A	Active	Policy	12	3
WEST VIRGINIA								
123	Berkeley-Morgan Counties Migrant Workers' Project	36,410	47,293	B	Active	No Board established		
WISCONSIN								
75	Migrant Medical Aid Program	24,996	27,347	B	Active	No Board established		

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[1] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

Number	Project Title	Amount Obligated FY69	Amount Obligated FY70	Services[1/]	Status of Project	Consumer Boards Established: Type of Board	Membership: No. of Consumers	Membership: No. of Non-consumers
WISCONSIN CONT.								
129	St. Joseph Migrant Family Health Clinic	$ 13,425	$ 20,180	B	Active	No Board established		
137	Migrant Labor Camp Sanitation Services	32,820	24,000	F	Active	No Board established		
169	Waushara County Migrant Health Clinic	27,639	15,261	B	Active	No Board established		
	TOTAL	$ 7,199,998	$13,998,416					

[1/] See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects
All other footnotes - See Attachment II

Attachment I - TABLE B

1/ CLASSIFICATION OF ORGANIZATION AND SCOPE OF SERVICES IN MIGRANT HEALTH PROJECTS

In order to facilitate the description of services provided by the projects, the following classifications were designed. It must be noted, however, that these classifications are not all inclusive. The designated codes shown for each project should be interpreted as being generally reflective of services provided and not as a precise measurement of all the specific services offered.

Classification Code of Services	Description
A	Full Time Comprehensive Health Services: A comprehensive range of diagnostic, therapeutic, and follow-up medical services offered by the project on a daily and year round basis by full-time medical staff in a center setting. Provisions for dental care, health counseling and outreach services, as well as adequate provisions for preventive services are offered either inside or outside the center.
B	Scheduled Comprehensive Health Services: A scope of medical services similar to those listed above are offered by the project, but through intermittently scheduled clinics (e.g. one or two times a week at two or three hours per session.) In general, these clinic sessions are backed by referrals of patients by nurses and outreach workers to local physicians on a fee-for-service basis at times when clinics are not in session. Provisions are also made for caring for other health needs such as dental care, health counseling, and outreach services in addition to preventive services. Environmental health activities are an element of the project.

C Scheduled Medical Services:

Although the project offers complete diagnostic, therapeutic and follow-up medical services through intermittantly scheduled clinics with referral to private physicians during non-clinic hours, provisions are not necessarily made to offer dental care services, and other health services mentioned above. Environmental health activities are an element of the project.

D Scheduled Categorical Health Services:

The project focuses upon clinics for specific diseases or categorical emphasis (e.g. Tuberculosis Control, Venereal Disease Control, Maternal and Child Health, immunization, etc.) and does not offer a broad range of medical services in a clinic setting. General health care is provided through referral by nurses and outreach workers to private physicians and dentists on a fee-for-service basis. Camp sanitation inspections, and efforts to correct deficiencies may be a component of the project.

E Non-scheduled Health Services:

All general health care is provided by the project through a fee-for-service referral system to private physicians, and, in some instances, to private dentists. Nursing services provided are primarily outreach and follow-up. Camp sanitation inspections, and efforts to correct deficiencies may be a component of the project.

F Limited Categorical Services:

The project has a specific objective, usually limited to environmental health services only, and is not directed to the provision of direct general health care. Environmental health activities usually involve camp inspections, enforcement of state codes, and coordinating efforts with other local sanitation programs.

G Administrative-Consultative Services:

The project does little, if any, in the way of providing direct health care and devotes its efforts to consulting and coordinating the direct health care activities of other groups.

Attachment II - TABLE B

FOOTNOTES

1/ See Attachment I - Classification of Organization and Scope of Services in Migrant Health Projects.

2/ Amount shown constitutes supplemental funds only and does not represent full amount of funds available for project operations.

3/ State-level coordination project (classification G) provides direct services (classification F) in two counties.

4/ State-level coordination project (classification G) which sub-contracts with 12 county health departments and one local hospital to provide direct health services. Classification of services in the county-level operations are as follows:

Butte County Health Department	C
Colusa County Health Department	D
Fresno County Health Department	C
Kern County Health Department	F
Merced County Health Department	C
Riverside County Health Department	D
San Joaquin District Health Department	F
San Luis Obispo County Health Department	C
Santa Barbara County Health Department	D
Santa Cruz County Health Department	C
Sutter County Hospital	B
Sutter-Yuba District Health Department	F
Yolo County Health Department	F

5/ State Advisory Board now being reconstituted to include elected majority of consumers.

6/ State-level coordination project (classification G) provides direct services of classifications D, E, and F in several counties in the State.

7/ A project headquartered in the District of Columbia will operate on the East Coast migrant stream to supplement existing project services concentrating primarily on continuity of care from one project area to another.

8/ State-level coordination project (classification G) which formerly sub-contracted with 10 county health departments to provide direct health services. In FY 1970 each of these county level projects were awarded separate grants.

9/ Additional consumers to form a majority will be elected.

10/ Amount shown does not represent full amount of funds available for FY 1970. Unexpended funds from previous year were applied as a carry-over balance to support approved activities.

11/ No funds were awarded in FY 1969. Unexpended funds awarded in FY 1968 were used as a carry-over balance to support services in FY 1969.

12/ A State Advisory Board is being developed five county-level programs have established, however, their own advisory committees with consumer representation.

13/ Governor's Committee on Migrant Affairs with consumer representative advises the State project.

RALPH YARBOROUGH, TEX., CHAIRMAN
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JOHN S. FORSYTHE, GENERAL COUNSEL

United States Senate
COMMITTEE ON
LABOR AND PUBLIC WELFARE
WASHINGTON, D.C. 20510

ON APRIL 20, 1970, SENATOR MONDALE SENT THE FOLLOWING LETTER TO THE SECRETARIES OF AGRICULTURE, LABOR, COMMERCE, HOUSING AND URBAN DEVELOPMENT, HEALTH, EDUCATION AND WELFARE, AND TO THE DIRECTOR OF THE OFFICE OF ECONOMIC OPPORTUNITY:

Dear Mr. :

As Chairman of the Senate Subcommittee on Migratory Labor, I have on several occasions visited in the lower Rio Grande Valley of Texas. It is absolutely shocking to view firsthand the poverty suffered by migrant and seasonal farmworkers living there, and particularly the lack of drinking water, sewage disposal, and sanitation facilities. The severity of the situation is best found in a recent letter I received from Reynaldo De La Cruz, President of Colonias del Valle. He says:

> "The situation is rapidly becoming worse. The lack of good water in many of the colonias is reaching a critical stage. A recent check of 8 water samples from several colonias in the Valley showed coliform organisms present in 6 of them. Many persons are taking their drinking from irrigation ditches. This water comes from the Rio Grande River, which is a 1,400 mile sewer.
>
> The people in the Valley are restless. They see the Anglo farmers with plenty of water secured through Farmers' Home Administration loans, which they are unable to get. They are told the City of McAllen gets over $.5 million to extend water and sewer lines into an industrial park. Where are the resources to build good water systems for these colonias? Due to the gravity of the situation we request this information be given to us as soon as humanly possible."

In view of the gravity and seriousness of this problem, I would be most grateful if you could send to me just as soon as possible a compilation of resources available through your Department's programs that might possibly be obtained for this area. If you have any questions regarding this matter, please contact Mr. Boren Chertkov, Counsel to the Subcommittee, Room 252 Old Senate Office Building, Washington, D.C. 20510; phone: 225-4538.

Your immediate attention to this matter is deeply appreciated.

With warmest personal regards.

Sincerely,

Walter F. Mondale, Chairman
Subcommittee on Migratory Labor

12 1970

DEPARTMENT OF AGRICULTURE
OFFICE OF THE SECRETARY
WASHINGTON, D. C. 20250

May 8 1970

Honorable Walter F. Mondale
Chairman, Subcommittee on Migratory Labor
Committee on Labor and Public Welfare
United States Senate
Washington, D. C.

Dear Senator Mondale:

This is in reply to your letter of April 20 concerning the lack of good water in certain colonias in the lower Rio Grande River Valley. You requested that we furnish you with information concerning any program we administer which could assist the people of this area to obtain good potable water.

The Farmers Home Administration of this Department is authorized by Public Law 89-240 to provide Federal loan and grant assistance for the development of rural water systems and waste disposal systems. Eligibility for this assistance is limited to public or quasi-public bodies and corporations not operated for profit which serve residents of open country and rural towns and villages of not more than 5,500 population. We are enclosing a pamphlet which briefly describes this program.

Sincerely,

Alfred L. Edwards

Alfred L. Edwards
Deputy Assistant Secretary

Enclosure

U S. DEPARTMENT OF LABOR
OFFICE OF THE SECRETARY
WASHINGTON

MAY 20 1970

Honorable Walter F. Mondale
Chairman, Subcommittee on Migratory Labor
Committee on Labor and Public Welfare
United States Senate
Washington, D. C. 20510

Dear Mr. Chairman:

I wish to acknowledge your letter of April 20 in which you asked if the Department of Labor administered any programs which might be of use in helping to provide water and sewage facilities in the colonias of the Lower Rio Grande Valley. I have taken this long to reply because I wanted this question to be given the closest attention in the Department.

After close consultation with all appropriate departments I must report that the Department of Labor has no programs directly applicable to the water and sewage needs you described.

The Department's Manpower Administration, however, has classified the three counties usually considered as comprising the lower Rio Grande Valley (Cameron, Starr and Willacy) as areas of persistent unemployment. This classification makes the area eligible for many kinds of assistance, including grants and loans for water and sewage installations. These programs are administered by the Economic Development Administration in the Department of Commerce. I am informed that Hidalgo County is included with the other three as one Economic Development District.

Applications for assistance under this program are first reviewed by the Lower Rio Grande Valley Economic Development Council, a community-sponsored organization.

Other possible sources of assistance are the Department of Housing and Urban Development (the Community Facilities Administration), the Department of Agriculture (Farmers Hom Administration), and The Department of Health, Education and Welfare (Migrant Health Division of the Public Health Service).

I hope this reply will be of assistance to you.

Sincerely yours,

George P. Shultz

Secretary of Labor

THE SECRETARY OF HOUSING AND URBAN DEVELOPMENT
WASHINGTON, D. C. 20410

MAY 12 1970

Honorable Walter F. Mondale
Chairman, Subcommittee on Migratory Labor
Committee on Labor and Public Welfare
United States Senate
Washington, D. C. 20510

Dear Senator Mondale:

Thank you for your recent letter regarding Federal programs that might be of assistance in financing the construction of water and sewer facilities for migratory labor communities in the lower Rio Grande Valley of Texas.

A member of my staff has discussed this matter with Mr. Boren Chertkov. As we understand it, these communities are unincorporated areas, generally located near incorporated municipalities that range from small rural towns to moderately large cities. It is our further understanding that preliminary information suggests that many or perhaps all of the neighboring municipalities would have little or no interest in assuming the obligations of providing the needed water and sewer facilities for the migratory labor communities.

Although the foregoing facts somewhat limit our opportunities to be of help, it would appear that there is at least some possibility that our Water and Sewer Facilities Grant Program and our Public Facility Loans Program might be of some assistance on this problem where the migratory labor camps are adjacent to urban municipalities. I am enclosing fact sheets on these grant and loan programs and we will be glad to arrange to have our Fort Worth Regional Office participate in a field review with representatives of your Subcommittee or with representatives of the migratory farm workers to determine the extent to which our programs can assist.

In the case of those communities located in rural areas, assistance would be under the jurisdiction of the Farmers Home Administration. It is my understanding that you have been in touch with that agency to get information on their water and sewer programs.

Please be assured of our interest in being of all possible help in this matter.

Sincerely,

George Romney

George Romney

Enclosures

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
WASHINGTON, D.C. 20201

SURGEON GENERAL
OF THE
PUBLIC HEALTH SERVICE

JUN 18 1970

Honorable Walter F. Mondale
United States Senate
Washington, D. C. 20510

Dear Senator Mondale:

This is in further reply to your April 20 letter to Secretary Finch in which you requested information about resources in this Department for improving environmental conditions of migrants and seasonal farm workers in the lower Rio Grande Valley of Texas. Your correspondent, Mr. De La Cruz, President of Colonias del Valle, is especially concerned with resources to build water systems for the Colonias in the area.

In this Department no agency other than the Indian Health Service is authorized to expend funds for water system construction in rural areas, and that Service's authority is limited to such construction on Indian reservations. Migrant Health Program grant funds, for example, are not available for the construction of sanitary facilities in migrant areas.

I deeply regret having to give you this negative response to your inquiry.

Sincerely yours,

Paul Q. Peterson

Acting Surgeon General

THE SECRETARY OF COMMERCE
WASHINGTON, D.C. 20230

JUN 2 1970

Honorable Walter F. Mondale
Chairman, Subcommittee on Migratory Labor
Committee on Labor and Public Welfare
United States Senate
Washington, D. C. 20510

Dear Senator Mondale:

This is in further response to your letter of April 20 concerning the deplorable living conditions of the migrant and seasonal farm workers of the lower Rio Grande Valley of Texas, and requesting a compilation of resources available through this Department's programs that might possibly be obtained for the area, particularly with respect to the lack of drinking water, sewage disposal and sanitation facilities.

The only program within the Department of Commerce under which these workers might be eligible for assistance would be the Public Works Program of the Economic Development Administration. It is possible that EDA could offer assistance under Section 101 of the Public Works and Economic Development Act of 1965, which authorizes direct grants in designated redevelopment areas if "(A) the project for which financial assistance is sought will directly or indirectly (i) tend to improve the opportunities, in the area where such project is or will be located, for the successful establishment or expansion of industrial or commercial plants or facilities, (ii) otherwise assist in the creation of additional long-term employment opportunities for such area, or (iii) primarily benefit the long-term unemployed and members of low-income families or otherwise substantially further the objectives of the Economic Opportunity Act of 1964."

We should point out to you, however, that the area where the project is to be located must meet certain specified criteria of high unemployment or low family income. The determination of such eligibility is made on the basis of data uniformly available throughout the country such as census data or data supplied by the Department of Labor. It is not possible at this writing to determine if the area in question is eligible, as we would need to know the specific county or couties involved. Eligible counties within the lower Rio Grande Valley are: Cameron, Dimmit, Frio, Goliad, Gonzales, Karnes, Kinney, La Salle, Maverick, Medina, Real, Starr, Uvalde, Val Verde, Webb, Willacy, Wilson, Zapata and Zavala.

EDA's Director of the Southwest Area Office, Mr. Millard K. Neptune, would be pleased to give any possible help to this group in an effort to determine whether they could qualify for EDA assistance or whether another agency might be better suited to assist them in their needs. If Mr. De La Cruz will communicate with Mr. Neptune at 702 Colorado Street, Austin, Texas 78701, he will be glad to arrange a meeting at a mutually convenient time.

Sincerely,

Rocco C. Siciliano

Acting Secretary of Commerce

OFFICE OF ECONOMIC
OPPORTUNITY

EXECUTIVE OFFICE OF THE PRESIDENT
WASHINGTON, D.C. 20506

MAY 11 1970

Honorable Walter F. Mondale
Chairman
Subcommittee on Migratory Labor
United States Senate
Washington, D.C. 20510

Dear Mr. Chairman:

Mr. Rumsfeld has asked me to respond to your letter of April 20 regarding migrant and seasonal farmworkers living in the lower Rio Grande Valley of Texas.

The Office of Economic Opportunity has no funds available at this time for this kind of sewage and water works project. It is our understanding, however, that the Farmers Home Administration is empowered by 7 USCA Sec. 1926 (a) (4) (B) to furnish loan and grant funds for construction of individual private water systems (consisting of a well, submersible pump, and storage tank). Under this provision, migrant workers could establish an organization to receive FmHA loan and grant funds for the purpose of constructing individual or community water facilities or both.

Your office may wish to contact the Farmers Home Administration for further details.

I hope this information is helpful to you. If we can be of any further assistance, please let us know.

Sincerely,

Frank Carlucci

Frank Carlucci
Assistant Director
for Operations

TESTIMONY PRESENTED

BY

MIGRANT LEGAL ACTION PROGRAM
WASHINGTON, D.C.

BEFORE

U.S. SENATE SUBCOMMITTEE
ON MIGRATORY LABOR

AUGUST, 1970

SECTION I

INTRODUCTION

The following testimony is presented to the Subcommittee by the Migrant Legal Action Program, a legal service arm of United Migrants for Opportunity, Inc. In preparation of this testimony we have had the assistance of Colorado Rural Legal Services, Idaho Legal Aid and the Migrant Research Project.

The hearings recently held by the Subcommittee have elicited much compelling testimony, and an N.B.C. documentary has graphically described the plight of the migrant farmworker in Texas and Florida. We have once again learned details of the horrible inadequacies in the availability of food, housing, and health care. We have learned that despite the federal government's programs designed to meet these most basic of needs, despite increased funding levels and administrative changes for these programs, the human suffering continues unchanged.

This is indeed a paradox, and this paradox raises fundamental questions relating to the wisdom and the efficiency of the system of cooperative federalism upon which these programs are premised.

The following testimony pinpoints three basic questions which must be explored in detail if effective solutions are to be reached.

1. HOW ARE THESE PROGRAMS ADMINISTERED AT THE NATIONAL AND LOCAL LEVELS?

The federal government is vested with the responsibility for the administration of numerous programs which were enacted and funded to improve the lives of poor persons. In administering these programs, and in accounting for the hundreds of billions of dollars of public funds allocated to them for this purpose, the federal government has an affirmative responsibility to insure these programs reach all categories of persons who should be served. It has an obligation to determine the characteristics of the intended beneficiaries and take positive steps to reach all persons within the class to the full extent of the resources allocated. Moreover, it must reach all segments within the class and not merely those most convenient to serve. It has additional public responsibility to evaluate these programs, ascertain where intended beneficiaries are not being reached, and rectify the situation, as soon as the need is apparent.

Migrant farmworkers as a group and as individuals are systematically excluded from the benefits of almost all major federal programs serving poor people generally. These programs are not administered in such a way as to encourage or even permit migrant participation, and in many instances regulations and instructions are promulgated which actually impede migrant participation.

2. WHY AREN'T THESE FEDERAL PROGRAMS BENEFITTING THE MIGRANTS?

Despite clear and long-standing recognition of these problems; despite the desperate need of these powerless people who have no way of bringing their starvation, illnesses, homelessness, and joblessness to public attention; despite the availability of government money and programs to meet their needs, no positive actions have been taken to administer these programs in ways that will benefit the migrant population.

Bureaucratic inaction of the sort detailed below under circumstances where: (a) public monies have been allocated for these purposes, (b) a clear and continuing situation of need has been shown, and (c) no effective action has been taken by the persons in charge of administering the programs rises to a level of nonfeasance and possibly even malfeasance.

Monies are being distributed in ways that clearly exclude a substantial and definable segment of the population intended to be benefitted by the programs, and the aid that these programs provide to those few who do receive benefits is so substantially below standards of adequacy as to be outrageous.

3. WHAT IS GOVERNMENT AT ALL LEVELS DOING ABOUT THE FAILURES OF THESE PROGRAMS?

As has been pointed out repeatedly, but must be emphasized again, the federal agencies administering programs to benefit migrants have abdicated responsibility. Although aware of the ineffectiveness of these programs, most of the administering agencies have chosen to do nothing to improve them.

Those major departments that we have studied admit that they lack accurate general statistics on the programs which they administer, and readily concede that they lack the specific statistics to determine migrant needs and participation. Prior hearings and subcommittee interrogatories have elicited facts showing that these agencies fund state and local officials without establishing priorities, guidelines or standards to which local officials must adhere if they wish to continue to receive funds. These hearings and interrogatories have also shown that these same agencies then use their lack of data to excuse themselves from any type of remedial action.

The federal benefits programs we have studied have no mechanisms for evaluating the effectiveness of the local administration of the program. Once a program is instituted or funds are granted to a locality, the funds create a vested interest in that locality. No matter how badly administered a program is, the local beneficiaries fight for the program's continued existence, while resisting program changes designed to improve its effectiveness. Despite the many alternatives open to the federal government to review the administration of these programs -- from encouraging responsive administration to cutting off funds -- this type of review is seldom made, and positive action almost never occurs.

The testimony presented herein concentrates on three government departments whose activities both directly and indirectly lead to continued exploitation of the migrant, and continuation of his economic and political powerlessness.

All of the activities at the very least constitute continuing nonfeasance -- failure to use power and funds to protect intended beneficiaries of government programs. In the case of the Department of Labor the active alliance of department representatives with agribusiness agents to circumvent the Wagner-Peyser and Crew Leader Registration Acts -- as well as the continuing refusal of the Department of Labor to construe these Acts to cover the persons directly responsible for the exploitation -- comes close to government complicity.

SECTION II

GOVERNMENT FACILITATION OF PRIVATE EXPLOITATION THROUGH THE DEPARTMENT OF LABOR

The Project on Corporate Responsibility told the Committee how Coca Cola, Alico, Teneco, and other major corporations either directly or through their corporate infrastructures own or operate farms that pay farmworkers substandard wages and force them to work under subhuman conditions. An even more pervasive source of migrant exploitation can be found by investigating the unspoken alliance between the food processors and the U.S. Department of Labor. A highly sophisticated system has been set up, with due regard to all procedural technicalities. The key element of this system is the Department of Labor's continued refusal to enforce its regulations against corporate exploiters.

The U.S. Department of Labor has responsibility for operating a system of interstate recruitment of farmworkers,1/ insuring that no farmworker is recruited through the interstate system to work on a farm that has substandard housing 2/ and registering and supervising crew leaders who operate in interstate commerce.3/

1/ The Wagner-Peyser Act, 28 USC 48 et seq., which established the U.S. Employment and Training Service (USTES).

2/ 20 Code of Federal Regulations 602.9 (1968); Gomez v. Florida State Employment Services, 417 F 2d 569 (1969).

3/ Contractor Registration Act, 7 USC 2041-53, 29CFR 40.

These regulations are being systematically violated in the following ways:

First: The U.S. Department of Labor has abdicated its regulatory duties to enforce the Wagner-Peyser and Crew Leader Registration Acts against corporate violators.

Second: The food processors have instituted a system under which they act in direct contravention of the regulations in collaboration with local growers and with state employment agencies who receive federal funding.

Third: The U.S. Department of Labor aids and abets them in these actions by an unreasonably narrow construction of their powers, under which they steadfastly refuse to take appropriate action against corporate violators.

Fourth: The U.S. Department of Labor further aids and abets such actions by continuing to fund State USTES Offices that cooperate and collaborate in these activities which are specifically designed to subvert the intent and purpose of these Acts.

Because prior testimony has concentrated on Florida and Texas, we have chosen our examples from the midwest and far west. These are merely illustrative of a nationwide pattern of exploitation carried on by growers and processors across the country.

EXAMPLE #1

All of the sugar beet growers in Western Idaho and Eastern Oregon have output contracts with Amalgamated Sugar. Amalgamated unilaterally determines the amount of sugar beets they will purchase in a given year. The farmers grow only that amount, all of which is purchased by Amalgamated Sugar.

Amalgamated Sugar handles all of the recruiting for the farmers with which it has output contracts. It hires and pays the salary of a recruiter, Carlos Martinez. This man is a direct employee of Amalgamated and operates the Amalgamated Labor Agency in the Rio Grande Valley. Amalgamated's recruiter, in turn, provides the crew leaders money to transport themselves and the recruited migrants to the farms.

Until two years ago, Amalgamated recruited through the Texas Employment Commission (TEC). At the time Gomez was decided, they ceased using the TEC offices, openly admitting they were doing so to avoid having to comply with the housing regulations.

The camps to which the migrants are transported are not operated by Amalgamated Sugar Company. They are instead run by farmers' cooperative associations. In fact, there generally is very little participation or financial backing by Amalgamated, other than the aforementioned output contracts and recruiting help. The farmers, who are generally not large growers, evade their responsibility for compliance with the Wagner-Peyser Act by arguing that they do not have the money to build decent camps.

The mechanism for oppression is the processor, Amalgamated Sugar

Company, who recruits for growers who are operating substandard camps. Since the processor does not run the camps, it refuses responsibility for the conditions of the very camps for which exclusively they supply labor, despite recognition that these conditions are as bad -- if not worse -- than those depicted in the recent NBC documentary on Florida.

EXAMPLE #2

Great Western Sugar Company, a sugar processor operating in Colorado and other sugar-producing western states, has established the Great Western Employment Agency, Inc. (G.W.E.A.), a Texas private corporation, to do its recruitment.

G.W.E.A. has no permanent employees. All of its employees are employed by Great Western Sugar Company the rest of the year; and, during the periods of time they are employed by G.W.E.A., they remain on Great Western Sugar Company's payroll and are paid by them. The President of G.W.E.A. is the vice president of Great Western Sugar Company in charge of labor, and there are several other interlocking directors.

G.W.E.A. recruits for the processor, Great Western Sugar Company -- not for the grower. Farmworkers are sent by the Employment Agency to a particular factory district. The field representative at the factory district places them with growers, without regard for the living conditions at the farm. The company pays the migrants a penny per person per mile to come up; and a like sum for the return trip, upon certification by the grower that the worker has satisfactorily completed his contract.

EXAMPLE #3

A similar system is used by Heinz, which recruits both for its own farms and for growers with whom it has output contracts in Iowa and Illinois.

Heinz' private recruiter, Pickle Smith, carries on recruitment efforts in conjunction with an employee of the Texas Employment Commission. The private recruiter does the talking and active recruiting, thereby avoiding the housing regulations. The State employee takes credit for the number of employees recruited for budget purposes.

These recruiters work in conjunction with the Texas Employment Commission, the federally-funded state employment agency responsible for interstate farmworker recruitment. Migrants who come to the Texas Employment Commission offices are informally referred to the private processors' recruiters. Some companies, like Amalgamated and Great Western, maintain separate offices. Others, like Heinz, have desks and space in the local state employment offices.

The private recruiters report migrants recruited to the Texas Employment Commission, which takes credit for the recruitment for budgetary and statistical pruposes, while abdicating all responsibility in terms of Wagner-Peyser enforcement responsibility.

These statistics, of employees recruited by private food processors' recruiters acting in contravention of U.S. Department of Labor regulations, are eventually submitted by the states to the Department of Labor each year to justify present and future federal funding levels.

It is not only in Texas that the State Employment Offices funded by the Department of Labor to provide better job recruitment, placement, and wage and housing protections for migrant farmworkers, act as direct agents for the growers, processors, and other corporate interests in their exploitation of the migrant.

An official of the Farm Labor Service of the State of New York for a number of months this year refused to process migrant complaints against a crew leader because the farmer did not want to proceed with the complaint. Nor would his office furnish relevant documents to enable the migrants to process their complaints at the federal level. It was carefully explained that without the farmer's endorsement of these complaints, no serious state action could be contemplated.

SECTION III

FAILURE OF U.S. DEPARTMENT OF HEALTH EDUCATION AND WELFARE TO UTILIZE EXISTING PROGRAMS TO SERVE MIGRANT NEEDS.

The Migrant Health Act

Since 1962, the Department of Health, Education and Welfare has administered a migrant health program, whose ostensible purpose is to ensure that "migrant workers and their children. . .share the health protection and services generally available to other U.S. citizens."[1] The extent of its failure has been tragically described by the doctors sponsored by the Field Foundation and other witnesses before the Senate Subcommittee on Migratory Labor during their recent hearings. Those attending the hearings were told that agonizing details of "constant unending stream of human sufferings."

> "It is difficult to convey the overall impression of our group in an objective fashion. Four consecutive days of an endless parade of illness, deformity, disability, and human suffering exerted a profound and demoralizing effect upon our team."[2]

> "Almost without exception, intestinal parasites were found in the stool specimens examined. Most

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[1] Senate Report 699 of Committee on Labor and Public Welfare, August 9, 1961 (S. 1130).

[2] Dr. Harry S. Lipscomb, Director of Institute for Health Services Research, Baylor College of Medicine, Houston, Texas, Statement to the Subcommittee on Migratory Labor of the Senate Committee on Labor and Public Welfare, July 20, 1970.

> of the children had chronic skin infections. Chronically infected draining ears with resulting partial deafness occurred in an amazing number of the smaller children. We saw rickets, a disorder thought to be nearly abolished in this country, and every form of vitamin deficiency known to us that could be identified by clinical examination was reported.
>
> I doubt that any group of physicians in the past thirty years has seen, in this country, as many malnourished children assembled in one place as we saw in Hidalgo County."[1/]

The true extent of the tragedy can only be measured when one realizes that most of the illness and disease seen by these doctors is preventable. Migrant farmworkers in the United States today are suffering and dying from diseases which could be cured by decent food, sanitary housing conditions and basic health measures that were known to the civilized world 100 years ago.

The doctors found that, as a group:

> "The people whom we examined represent an almost "pure culture" of a society totally peripheral to the influence of American health care. In a nation where levels of speciality care in medicine have achieved laudable heights, this group has not yet found its way to our most rudimentary care facilities. Such simple necessities as glasses, false teeth, braces, hearing aids, dental repair,

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[1/] Dr. Raymond Wheeler, Charlotte, N.C., Statement to the Subcommittee on Migratory Labor of the Senate Committee on Labor and Public Welfare, July 20, 1970

> rehabilitation, plastic surgery, repair of congenital deformities, maintenance of simple hygiene, and repair of cervical lacerations following childbirth, this population -- uniquely -- seems to have never attained. The specialities of plastic surgery, obstectrics and gynecology, pediatrics, surgical opthalmology, and otorhinolaryngology have no meaning to these people, for they have never had access to this high level of professional care." [1]

The evidence of the Field Foundation doctors and others clearly indicate that the bulk of the migrant farm-worker population has not gotten substantial benefits from this program. The statistics substantiate this fact. The migrant has a life expectancy twenty years less than the average American. The infant and maternal mortality is 125% higher than the national average. The death rate from influenza and pneumonia is 200% higher than the national rate and from tuberculosis, 250% higher than the national rate. The accident rate among migrant farmworkers is 300% of the national rate.

One reason for the migrant health program's failure is the profound discrepancy between the professed goal of the program and the level of funding. Initially $3 per migrant, now $15 per migrant, the program's funding is reminescent of an underdeveloped country, rather than the United States, where the average person now pays about $300 per year in direct costs for medical care.

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[1] Statement of Dr. Harry S. Lipscomb, op. cit.

But even within the strictures of a drastically underfunded project, the funds appropriated for this program have not been utilized in optimal fashion. Expenditures have not been made in ways that would foster quality health care for migrants. Neither HEW's awarding of grants nor its monitoring of those grants has been carried out in ways designed to assure quality care. The reasons are twofold. The first has its inception in administrative decisions relating to methods of funding, the types and quality of programs to be funded, and the absence of standards by which to measure the potential of prospective projects and performance of funded projects.

The second reason is attributable to the marked success of local opposition by state and county medical associations and public health departments in defusing recent HEW efforts to institute constructive changes in these programs and to fund projects that would be capable of delivering quality comprehensive medical care to migrants.

The following basic policy choices made early in the program and continued until a few months ago have rendered the migrant health programs ineffective.

First, rather than using the very limited and admittedly inadequate funds to establish a few high quality comprehensive care units in places with large migrant populations, the program administrators dispersed the funds widely. The average grant was less than $60,000--far too little to produce comprehensive care clinics. In fact, this amount of money is barely sufficient to enable projects to carry on immunization programs, tuberculosis clinics, and periodic general outpatient hand-out type care.

Second, despite the fact that the legislation specifically provided for funding of special projects run by agencies and institutions other than the state and county health departments, the great majority of projects were entrusted to state and local health departments which were neither, inclined, equipped, nor technically capable of delivering the type of comprehensive medical care needed by the migrant community. Most of these local clinics use fragmented methods of medical care, almost on an assembly-line basis--i.e., one day per week is devoted to a given disease. For example, if a migrant mother with a sick baby shows up on a day devoted to well babies, the sick baby is not treated. The mother must return on the day designated as a sick baby day. Similarly, if a woman came in for polio immunization, a cancer test, and treatment for a kidney ailment, these clinics are not set up in such a manner that all of her ills would be diagnosed and treated at the same time. She is instead required to return again and again at the hours during which the clinic is dispensing that type of care (if, indeed, it dispenses it at all).

An Antioch student who worked as a migrant in the midwest stream during the summer of 1969 to investigate and report on life in the migrant stream described one such clinic as follows:

> "The general atmosphere was that of a cattle vaccination pen - people being herded in and out, health cards being checked, filled in, duplicated, etc. None of the clinic staff . . . could speak a word of Spanish. The doctor listened no more than 30 seconds to a patient's explanation of his malady. Then out came the needle." [1/]

While the majority of the patients were children who undoubtedly needed vaccinations, they are receiving them at the expense of acquiring a fear and distrust of doctors and medicine that will not be easily overcome. The student reported that many of his fellow farmworkers who badly needed treatment were loathe to enter migrant health clinics because they did not want the shots which were usually the only treatment offered.

1/ Diary of William Burgraff, describing the migrant health clinic operated two nights per week in Frost, Michigan, summer of 1969.

Over the years the funded clinics have not adapted their procedures to provide comprehensive, primary medical care to migrants. In addition, political and personal relationships tend to impede effective performance by certain health department employees whose primary duties under the migrant health legislation might come in direct conflict with the interests of local growers and other persons of importance in certain communities. For example, a sanitarian employed by a county health department in an area where growers either compose or control the local board of health will be under great pressure to avoid effectively enforcing sanitary codes in labor camps owned by those growers.

Third, the program has established few standards of performance. No guidelines have been promulgated establishing standards to which grant recipients must adhere. No assessment has been made as to the quality of services in fact provided by each grantee.

Few program statistics are kept. In response to enquiries relating to the amount of money spent for sanitation, the most that could be adduced was tht it was estimated that approximately 8 to 10 percent of the program's money was used to finance environmental services. No further breakdown was available as to what constitutes environmental services or how much effective sanitation work was performed with that money. Other crucial data, such as a state-by-state breakdown on amounts spent for physician services or the number of projects offering comprehensive clinics, was also unavailable. Without basic information of this nature, it is not possible for anyone to make an informed evaluation of a project.

In preparing statistics on the program, HEW compiles data on "migrants covered." This category statistically describes the number of migrants passing through a country in which a migrant health project is operated--no matter what the scope or quality of the service provided or the length of stay of the migrant.

Fourth, it was determined that the program would be operated as a grant program, rather than either as a medical care or a community oriented program with high migrant participation at the planning and decision-making stages. The bulk of the program staff, both in Washington, D.C. and in the regional offices, are people who are neither familiar with concepts of medical care organization nor the social and economic development of the migrant community. Not one HEW migrant health regional representative is a Black, Chicano, or Puerto Rican. This program is mainly administered by persons who are either out of touch with the needs of the people their program is supposed to serve or wedded to traditional "safe" public health concepts.

Despite the March 1970 amendment to the Migrant Health Act, which was intended to foster community participation in the planning and implementation of each project, few steps have been taken to encourage such participation by the migrant community. To date about 120 projects have no such consumer or community participation and thus continue to operate in violation of the law.

Despite a general recognition of widespread deficiencies in the program, no evaluation has been done to assess how migrant needs might better be served; whether funds should continue to be distributed along present policy lines (giving small grants to state and county public health departments which are generally unequipped to give comprehensive medical care and unresponsive to community needs); or whether policies of this sort should be re-thought and other alternatives used to provide care for migrants.

The absence of program standards and evaluation mechanisms serve important local political ends. Without objective standards by which to measure performance, it is virtually politically impossible to defund or terminate a project. Funds once allocated tend to become a vested interest of the grantee. Absent extraordinary misappropriation of funds, they are virtually granted in perpetuity. In essence, the program has evolved into a source of funding for the state or county health departments to subsidize functions that they would be obligated to perform anyway.

We have been unable to obtain data on the number of projects terminated since the program's outset, but have been assured the number is very small. A tabulation of all current projects and the number of years eachhas been supported indicates that 61 current projects have been funded for five or more years and 54 current projects are from 1 to 4 years old. Between 1962-1969, as funds for the overall program were increased, more small projects have been added. Few projects are ever dropped and increases in funds for on-going projects have been modest. A noncompetitive pattern has developed which provides little incentive for year to year project improvement. The lack of hard data by which to evaluate performance perpetrates this system of small, underfunded, and ineffective programs.

As mentioned above, the other basic impediment to successful operation of a migrant health program has been the strength of local political opposition. HEW has received a substantial increase in migrant health funds within the past year. While its basic funding is still used to maintain projects funded in previous years, approximately 3 million dollars of new funds were allocated to a limited number of projects which would be equipped to offer high quality comprehensive medical care. These new grants have been made to community groups with direct ties with the migrant populations that they seek to serve, rather than to state or county health departments. Each of the grants has been for approximately $400,000, and each project is budgeted for two to three doctors, and a number of paraprofessionals and indigenous aides.

The political opposition to these programs has been extreme. The county medical societies have basically objected to the use of salaried doctors and to the operation of consumer sponsored projects over which they have no control.

A compelling example of how local opposition has thus far prevented migrants from receiving decent health care occurred this year in Immokalee, which is located in Collier County, Florida (a county with an estimated migrant population of 13,000). After the 1968 hunger hearings in that town, there were profound pressures to mount a significant health effort. The county health department, which had traditionally operated the program, adamantly opposed the expansion of its program to include significant personal health services to migrants. HEW's migrant program personnel in Washington recruited the University of Miami to devise a comprehensive health care system for Immokalee. The system would have included extensive high quality services by physicians on salary and community participation in the policy-making process. Opposition by the Collier County Medical Society, the Florida Medical Association, and the State Board of Health was sufficient to induce the government to abandon these plans. Immokalee is still devoid of a decent system of health care for migrants. A similar program was funded in the more congenial climate of neighboring Dade County.

Another instance where local opposition has prevented a substantial improvement in migrant health care programs is that of Hidalgo County Texas (a county in the lower Rio Grande Valley with an estimated migrant population of 40,000). For the past five years, the local health department of Hidalgo County has operated a migrant health project that even it admits is totally inadequate. Not only is the program under-funded, but the health department lacks the technical capability to deliver good quality health care. It has neither sufficient manpower nor equipment, and has no direct ties to the migrant population.

Dr. Ramiro Casso, a doctor in general practice in McAllen, Texas, described the public health activities in Hidalgo County as follows:

> "At present, these activities are limited to tuberculosis detection, follow-up on contagious diseases, and immunization of children. The inadequacy of our immunization program was pointed out during the past two months when in Hidalgo and Cameron Counties, we (uncovered) suspected (cases of) poliomyeitis." 1/

Dr. Casso himself operates a charity clinic at the Farmworkers Service Center in McAllen three days a week. He treats from 40 to 120 patients a week, but is severely hampered by lack of adequate equipment, examining rooms, X-ray and laboratory facilities.

1/ Statement of Dr. Ramiro R. Casso before the Senate Subcommittee on Migratory Labor, July 20, 1970 .

The overwhelming turnout of the people of the Valley during the 5 days that the Field Foundation doctors operated an accessible clinic demonstrates more compellingly than any words how desparate the farmworkers in Hidalgo County are for health care.

The doctors found that: "These people are hungry for care. They are dying for want of it." [1/] Yet the Dallas regional office of HEW has been content to let the migrant health program in Hidalgo County continue to operate at its present level.

A few facts about health conditions in the Valley should suffice to illustrate the total inadequacy of the present migrant health program. Hidalgo County has more cases of tuberculosis than any other county in the country. It also presently has a polio epidemic, in which 3 children have died, and at least 11 more are suspected of having contracted the disease. Dr. John Copenhaver, Director of the migrant health projects for Hidalgo and Cameron Counties, criticized the Field Foundation doctors' reports as inaccurate because of their shock over uncovering a case of leprosy. The local newspapers have reported Dr. Copenhaver as asking "What's wrong with one case of leprosy? I know there are at least a hundred in the Valley."

[1/] Statement of Dr. Harry Lipscomb, op. cit.

Although Valley-wide inoculation efforts have been undertaken by the public health authorities in an effort to halt the spread of polio, outreach efforts are proving ineffective in reaching the persons who most need the vaccine, many of whom live in outlying areas and neither own radios nor read the newspaper.

This past year, there was an opportunity to dramatically increase migrant health services to this area. Major efforts were initiated by the Washington office. It sought to develop ties with a local community organization (Colonias del Valle), to bring together community and provider groups, and to provide them with sufficient money to operate a comprehensive health care center. HEW had reserved the funds and actively encouraged the funding of such a project; the consumers were interested; the health department was prepared to cooperate; and Dr. Love, the newly elected president of the local medical society, was prepared to cooperate.

It should have been the task of the regional office to develop and cement a program in this depressed area. Rather than aiding or participating in any of these efforts, the regional office simply sat back to await proposals and made no affirmative efforts to coalesce a program. It ultimately selected the health department proposal, which it acknowledged to be completely inadequate. Finally, rather than accepting a $400,000 grant for one project, the regional administrators persuaded HEW to divide the money in two $200,000 grants, and later halved it again. In effect, through lack of interest, uninspired leadership, responsiveness to local political pressure, and general bureaucratic inertia, the regional administrators induced HEW to reproduce the traditional inadequate and nonresponsive health project in the place of what had been a promising beginning for comprehensive, consumer-oriented health care.

Perhaps most blatant of all have been the political and private pressures on HEW to suspend payment of funds and/or defund the three comprehensive health clinics funded in the State of California. Thus far, political pressures have succeeded in forcing HEW to suspend payment of funds to the Kern County project for 90 days, while the health needs of the community undergo additional study. Such a step appears totally unprecedented in government contract law. It amounts to unilateral suspension of a grant for reasons having no basis in the grantee's performance.

Similar pressures are presently being exerted on the Imperial Valley Clinic, and a group of local physicians have sued HEW to block payment of funds to the migrant health clinic.

Although the Department of Health, Education and Welfare has been derelict in its duty to provide quality health care to migrants, it has in no sense been derelict in its fulfillment of the legislative intention behind the passage of the original bill. In fact, a student of the legislative history of this act cannot be surprised that the migrant gets little benefit from the migrant health programs. Congressional reports document that the Migrant Health Act was intended to provide protection for the surrounding communities against the spread of disease from migrants, to assure a healthy supply of laborers to pick the crops, to provide subsidies for state and local health departments, hospitals, and other local interests. The migrant health program functions well for these purposes. The only people who fail to receive benefits are the migrants.

SECTION IV

DEPARTMENT OF AGRICULTURE'S FAILURE TO SERVE THE NEEDS OF THE MIGRANTS THROUGH EXISTING PROGRAMS [1]

1. FOOD STAMP AND COMMODITY DISTRIBUTION PROGRAMS

The Department of Agriculture has adopted a policy of consistent refusal to take affirmative steps or institute affirmative measures that would enable migrants to receive benefits under existing federal food programs. It has done so in the face of clear evidence of hunger and need. Selected examples of USDA's insensitivity to migrants at every level, ranging from matters of far-reaching program and policy concern to matters of minimal significance to any but the indi-vidiuals forced to go hungry, are set forth below:

First: Despite USDA recognition that "(M)igrant workers and their families while in the migrant stream do present special problems because of (1) their mobility; (2) the frequently short-term and unpredictable patterns of their need for food assistance; (3) the constantly changing composition of the migrant family as it moves in the migrant stream; and (4) the difficulty of projecting the current incomes of individual migrant families," [1] it has taken no steps to institute programs responsive to these needs.

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[1] The information contained in this section was prepared by the legal staff of the Migrant Research Project, which has previously submitted testimony on this subject. The Migrant Legal Action Program, the successor to the MRP legal staff, takes full responsibility for the views set forth herein, but gratefully acknowledges the resources provided by MRP in the preparation of the initial draft of this testimony.

Although in May, 1970, USDA officially stated:

> "We further anticipate that, compared with last year, a larger number of migrants who move into user areas may experience longer periods without employment . . . ."" [2]

and, although it has additionally reported that it anticipates:

> "A continuation, and probably an intensification, of temporary periods of unemployment or under employment because weather or other conditions may result in late harvest schedules or a temporary stoppage of work in the fields . . . ." [3]

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[1] Information and Program Data submitted to Senate Subcommittee on Migratory Labor by Richard Lyng, Assistant Secretary, U.S. Dept. of Agriculture, May 25, 1970. (hereinafter referred to as USDA data, 5/25/70), No. 1 (f).

[2] Ibid, No. 1 (e)

[3] Ibid.

the Department of Agriculture has instituted no measures to effectively cope with recognized migrant needs for food during these periods of unemployment.

Second: Despite the authority granted the Secretary of Agriculture under 7 U.S.C. § 2013(b) to call hunger amongst a definable portion of the population a national or other disaster and authorize commodity distribution and food stamp programs in the same jurisdiction for the benefit of such persons; and irrespective of clear legislative intent that emergency situations as defined in that section were specifically intended to include seasonal farm workers during the months they are out of work; and irregardless of USDA commitments in the food stamp hearings that this section would be so construed; USDA has consistently refused to view hunger amongst migrants as an emergency warranting special food distribution efforts. [1]

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[1] Memorandum to Secretary of Agriculture from Subcommittee Counsel re: (1) Issuance of Free Food Stamps, and (2) Distribution of Federally owned Foods During Emergency, May 9, 1967, reprinted in "Hunger in America~~n~~," October 1968 report of the Senate Committee on Labor and Public Welfare, pp. 29-30. (Footnote continued on next page)

Third: Despite the fact that USDA has the further power to establish mandatory emergency thirty-day certification procedures for migrants in all food stamp and commodity programs, and despite the fact that a clear and pressing need for such procedures has been shown, it has not done so.

(Footnote continued)

Mr. Cooley:

> "The fact that a household may have no income at all during portions of the year does not necessarily prevent that household from participating in the food stamp program. If there are circumstances in any community which would prevent many households from being eligible to participate in the food stamp program for a temporary period, it seems to me that this could qualify such an area under the "emergency situation" provision of the Senate bill and that the Secretary of Agriculture would be permitted by the language of the Senate bill to institute a direct distribution program of such scope and for such period of time as he might determine necessary to take care to these families.
>
> "I have discussed this matter with the Secretary of Agriculture and he informs me that this is the manner in which he believes the language should be construed if the bill is enacted as amended."

The Cooley-Jones debate must be placed in the context of Jones' concern with seasonal agricultural workers in his rural district who were without income for several months of the year.

Fourth: Despite USDA's authority to issue instructions and regulations which would exclude a migrant's car and/or work transportation costs in computations of income, it has not done so. (Similar exclusions of work-related transportation costs have been promulgated for participants in a variety of OEO programs. See, e.g., CFP (FS) Instruction 722-2, Rev. 1, 10-2-67). In this regard it should also be noted that USDA could easily model a regulation along the lines proposed by HEW in its family assistance bill. This bill clearly distinguishes, among other things, between work-related automobile ownership and ownership for personal convenience. Accordingly, continued maintenance of this arbitrary restriction on grounds of administrative feasibility is unwarranted.

(Footnote continued)

In that context, and on its face, Cooley's closing statement, quoted above, clearly indicates that the Secretary is not only empowered, but is expected to declare an "emergency situation" where there exists a substantial number of households without cash income with which to meet the minimum purchase requirements for food stamps.

Fifth: Despite widespread realization of hunger in the migrant stream, USDA has not even taken the minimal step of issuing a regulation broadening the interpretation of a "cooking facility" to enable the many migrant families on the road who do not carry stoves and perhaps cook over campfires to be eligible for food stamps.

Sixth: Most egregious of all the abdications of its responsibility is USDA's steadfast refusal to collect relevant data to assess migrant needs, [1] coupled with its consistent use of lack of data as an excuse for failure to develop programs for migrant participation. [2]

For any agency to formulate and administer major programs and policies without data, and in fact without any reliable information upon which to

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(Footnote continued)

Once such emergency is determined, the Secretary then has authority to distribute free federally owned foods in an area, concurrently with the operation of a food stamp program, under Commodity Credit Corporation distribution legislation and under Section 32 of the agricultural Adjustment Act.

[1] USDA data 5/25/70, No. 2 (c). "It has not been deemed feasible or practical to request States and areas to identify and classify the categories of participants."

[2] Appendix A contains an in-depth analysis of the USDA statistics supplied in conjunction with USDA data 5/25/70.

base such data, [1] has in other contexts been considered an abdication of responsible functioning and subject to judicial or legislative redress. Under 7 U.S.C. § 2019, which sets forth guidelines for administration of the food stamp program, USDA has both the power and the discretion to promulgate uniform regulations for all participating states which would:

(a) force state plans to take into account migrant problems and set forth special procedures for dealing with them;

(b) establish uniform reporting formats for all state and local authorities, and enforce compliance therewith as a basis for participation in the food stamp program;

(c) promulgate special certification procedures to be put into effect as part of every state plan, which would apply to those persons such as migrants who are not effectively participating in food programs.

1/ Ibid., No. 2(b)

We submit that USDA has not merely passive authority in operation of these programs, but an affirmative responsibility to take these steps, and to force state plans to institute policies responsive to migrant needs. To do less in the face of such clear need constitutes a continuing abuse of discretion.

The problems impeding migrant participation in federally-funded food programs have been recognized and documented for years. They include, for example, the failure to require flexibility in the lumpsum or twice a month coupon issuance in food stamp programs, despite realization that many poor people have not enough cash to make the initial payment. Some of the most common and recurring problems preventing migrants from receiving the benefits of both programs are set forth below:

Certification Problems: Families receiving public assistance are automatically eligible for participation in the food stamp and commodity distribution programs. Poor families not receiving public assistance must demonstrate their eligibility for certification to purchase food stamps or commodities.

Migrants, because public assistance has until recently been conditioned on residence and federal assistance is predicated upon classifications which normally exclude migrant family eligibility, are usually in the category of non-public assistance households. They, therefore, are continually obliged to establish their eligibility for stamps.

While any process of applying for benefits from the government entails some difficulties and demeaning of the applicant, there are usually ways in which the hardship and the extent to which the process is demeaning can be minimized. For migrants, not only are the problems not minimized; they are multiplied by a factor which affects no one else. Because of their transitory status they are subjected to this process more often. They repeatedly face new personnel, new hours, new questions, and new standards. There are no standard criteria for documentation of need, income, etc. Nor is there a standard pattern of questions to determine income: How much did you make last month? How much did you make last year? What do you usually make a month? How much do you expect to make this month? Next month? Each of these questions will elicit a different response. Yet, on any of those varying criteria, a determination is made regarding eligibility for food program benefits.

Once again, non-standard methods for eliciting income information present a greater problem for migrants than others.

Normally, applicants living in an area and dealing with the same office over a period of time learn what type of information is being sought and the officials learn to evaluate the information offered. A private, local language develops, but the migrant is not a party to this communication process. He will often be denied his right to participate because he and the local office misunderstood what information was sought or supplied.

Local offices not only use different questions to get information about income, but their understanding of income is not applicable to a person who works only four, five, or six months, and USDA has taken no steps to develop a standard to apply to migrant incomes and to insure that it is consistently applied.

Documentation Problems: Migrants often work for crew leaders and never know the identity of their true employer. They shift employers frequently, sometimes daily. They are often paid in cash. Debts (real and pretended) are deducted from wages, etc. To obtain a fair picture of a migrant's economic position takes time and techniques which differ from those applicable to non-transient poor.

Local standards for documentation fail to take into account the special problems of migrants. Moreover, even if the migrant can provide the level and type of documentation in one locality, he is faced with different requirements in other localities. The migrant, because he changes jobs, does not know his employer, is paid in cash, and moves around, has less documentation of income than others; but in order to participate in the food stamp and/or commodity programs, he must produce more documentation than anyone else, since he will be called upon to meet different requirements in different places. He must carry with him at all times extensive records of the minimal income he actually receives, and, in addition, is faced with the almost impossible task of affirmatively documenting lack of income at slack employment periods.

Insufficient Outreach Efforts: There is inadequate outreach effort on the part of USDA and local officials in the operation of all food programs generally; and the failure to reach migrants is even more compelling than the general failure. There is not even a USDA estimate of target population, and no statistical mechanism to determine whether or not any given county is serving the needs of the people.

USDA reports that "outreach programs are not monitored through a regular reporting system."[1] Yet, no efforts are being undertaken to institute one.

Rejections: Assistant Secretary Lyng recently reported: "The Department of Agriculture does not require States and localities to report to it on the results of the millions of certification actions undertaken each year in dealing with hundreds of thousands of applicant households."[2] Without data on rejections there is no way to determine the nature of the local decisions that affect the operation of these food programs. The food stamp program, in particular, is remarkably unconcerned with rejections. Several pages of regulations deal with the rights of the grocery store owner who is denied the right to accept stamps. None, however, deal with the poor person who is denied the right to purchase them. Nor has USDA in its recently instituted hearing procedures mandated expedited time schedules for hearings and appeals, despite the urgency of problems of hunger and the fact that any delays in certification of migrants, no matter how short, are usually the equivalent of a total denial because the migrant is forced to move on in search of food and employment and his rights become moot.

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[1] USDA data, 5/25/70, No. 3(a).

[2] *Ibid.*, 5(a).

The obtaining of adequate statistical data on decertification and rejections and related matters such as office hours, outreach efforts, etc. is crucial to insuring that the food programs work for the typical poor person, as well as for the migrant. It is likewise crucial to an intelligent assessment of the program and the fostering of constructive changes.

Since USDA now places principal reliance on the expansion of its food stamp program, one significant deficiency in the fiscal priority system warrants particular comment. The money appropriated for the food stamp program is given out in the following way: Counties apply for the program. They are accepted on a first-come, first-serve basis, with no condition placed on the amount that can be spent. The food stamp budget is maintained by admitting only as many new counties as the budget can cover. (If the food stamp budget were lowered, the equivalent technique for retrenchment would presumably involve cutting off counties rather than setting a limit on what could be spent in any county.)

This allocation method is improper. It leaves to chance the question of which county is to be served and which will be held on the waiting list. Of necessity, it permits a relatively richer person in County A to receive food stamps before a relatively poorer one in County B. It is not based on a standard of need. At best, the allocation method can be described as an aid to accounting, not a technique tailored to effectively feed the poor with money designated for that function.

USDA's highly suspect allocation system is paralleled by many other deficiencies that undercut its mandate to administer the programs to serve all poor persons possible. For example, USDA apparently has no way of determining the number of persons in a county that are in need of food stamps. Nor has it any way of determining whether the local program meets the local needs. And it takes no steps to collect necessary data to evaluate these needs. The food stamp program is supposed to be a federal program operated by cooperating state agencies. Yet the overall system of allocation does not even allow the federal government to learn whether the money is reaching the people who most need it.

Rather, the department's technique for allocating funds and balancing its budget places a premium on keeping each county's expenditures roughly constant. Every county may spend as much as it can. Since there is no limit on a county's spending, USDA must rely on the fact that counties will have a roughly constant level of expenditures. If a county suddenly spends more, USDA will want to know the reason. Inquiries from USDA will naturally retard the eagerness of any county to spend more. But there is never a target study to determine a proper level of expenditure per county per month of the year. Indeed, there is a reluctance built into the system--one that operates to inhibit a county from increasing its expenditures--at the same time that the county might be asked to seek out and serve an influx of migrants. Within the program design and fiscal priority system sanctioned by USDA, it is no small wonder that migrants are not and cannot be served by the food stamp program.

2. CHILD FEEDING PROGRAMS

In addition to the operation of broadly mandated food stamp and commodity distribution programs, the USDA administers seven other food oriented programs directed at meeting the special nutritional needs of young children: school breakfast, school lunch, plentiful foods, direct commodity distribution, school milk, special food service and non-food assistance.

Legislation creating these seven youth-oriented feeding programs expressly recognized the failure of existing general food programs to meet the special needs of the growing child. The collective goal of the seven programs is to provide the minimum nutritional requirements necessary to enable every child to develop into a physically normal adult.

The child of the migrant family is unquestionably an intended beneficiary of these programs. However, the administrative framework under which the youth food programs operate precludes significant participation by children of migrant families. Although USDA has many times been made aware--through prior testimony, articles, and in-field studies and reports--of the special nutritional problems of migrant children, and although it has repeatedly acknowledged the existence of these special needs, it has failed to reorient its youth programs to meet them. By not taking immediate steps to correct the deficiencies in these programs USDA has ignored clear Congressional mandates.

One major problem occurs because the youth feeding programs are institutionally based: they are all housed in and administered by educational or quasi-educational institutions (e.g., day care centers, day camps, etc.). For many months of the year the child of the migrant family does not receive the benefits of any program geared to the normal schedule of an educational institution because:

1. The migrant child is most in need of assistance during the summer months when he is not in school but traveling with his family.

2. The migrant child, whether in the home-based state or in the stream, frequently leaves school to work in the fields alongside his parents.

USDA regulations governing the youth feeding programs pose many of the same problems as the food stamp and commodity distribution regulations--e.g., arbitrarily imposed qualifications for certification, lack of uniform channels for communication between state and federal agencies, etc. In addition, there are other serious administrative deficiencies in these programs. These problems are further compounded by USDA's refusal to compile accurate data and establish necessary guidelines to evaluate (1) whether the program is reaching all classes of intended beneficiaries; and (2) whether it is being administered in a fair and non-discriminatory manner.

Most of the youth feeding programs distribute the money on a matching funds basis--i.e., the local school agrees to provide "x" dollars in return for a promise from the state and federal governments to provide "y" dollars.

As is true of most programs administered in this manner, the local school system frames its request for matching funds on a yearly estimate of its needs. Since neither the magnitude of the influx of migrant children nor their special nutritional needs can be predicted with any accuracy, a system sanctioning an allotment of funds one year in advance necessarily discounts the needs of migrant children who are not stable members of the community.

The built-in limitations to local resources take on particular significance because they cannot be detected under the present reporting and monitoring system. There are no effective recordkeeping requirements. USDA has placed the responsibility for data collection and recordkeeping with the state agencies, but has not established uniform formats or standards to insure all states will be compiling comparable data. Indeed, the regulations do not even require that the state administering agencies conduct an audit or otherwise monitor the programs. Thus, USDA disperses millions of dollars in support of youth feeding programs without periodic audits as to how the money is being spent.

This lack of a regular audit of the needs and disbursements of local agencies allows a school unable to meet the financial burden of feeding temporary students to either simply refuse to feed them or to stretch its regular budget to serve an expanded population, and no one will be the wiser if a school system chooses to evade its responsibilities by either course of action.[1]

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[1] Under the Proposed Revision of the Regulations Governing the National School Lunch Program to become effective for the school year 1970-71, the local agency will be required to file a monthly breakdown of the number of lunches served at full and reduced prices and at no cost. This report is to contain, however, only the number of lunches served and not the number of children requiring the benefits of subsidized lunches.

The timing of USDA's fiscal request system creates still another problem for communities planning to include migrant family children in their estimates. Under the regulations governing the youth food programs any school interested in participating in the youth food programs is required to submit a semi-annual report indicating the amount of money necessary to run programs during the next six months. Reports are due on the first days of April and Octobter of each year.

As of April first, most of the local agencies that should be serving migrant children in the summer stream states have no accurate method of estimating the number of additional children who will be arriving in the community, or the additional expenses necessitated by their advent. Similarly, under the October filing date, many "summer states" will have cut back their requests, presuming that the migrant child will soon leave the area; but the "winter state" is not yet in a position to accurately estimate the number of children returning to the area.[1/]

There is still another serious problem created by USDA's refusal to undertake the responsibility of overseeing the general

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[1/] Under the Proposed Revisions the dates for filing the semi-annual report have been changed to March 1 and October 1, but the problems remain basically the same.

administration of the youth food programs--a problem common to all recipients, not just migrant family children. Although regulations forbid the local agency from discriminating against those who cannot afford to pay for their meals, USDA has not developed a monitoring system to insure that schools are in fact complying and providing meals to all eligible persons in a manner that prevents discrimination against those unable to pay and in a way that insures all needy children are fed.[1] And there is no administrative procedure short of commencing judicial proceedings whereby a recipient can attack discriminatory treatment.[2]

The problems cited in this section are not new. All were cited in testimony recently presented to this Committee and other appropriate Committees. Yet, USDA has consistently failed even to acknowledge that the problems exist with regard to migrant family children, let alone propose a mechanism for eliminating these problems. As recently as June 19 of this year, Mr. Richard Lyng, Assistant Secretary of Agriculture, in presenting testimony before the Select Committee on Nutrition and Human Needs, admitted that the focus of the child nutrition programs needed to be re-oriented. He added quite surprisingly, however, that USDA has already decided to place emphasis on children residing in urban areas.

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[1] Under the proposed regulations, the local agency will now be required to develop procedures to protect students from discrimination. But once this set of procedures is filed with and accepted by the State agency, no further demands are made of the schools unless a spot check of the schools by the state authorities uncovers a violation. This proposal neither assures uniformity in the monitoring of local feeding programs nor effective enforcement of a fundamental provision in the feeding programs.

[2] Under the proposed revisions, families denied requests for food assistance for their children may invoke a grievance procedure. However, no procedure for redress is provided for the child who is receiving food in a discriminatory manner.

While we feel that any remedial work done in the area of child assistance programs is admirable, we firmly believe that the child of the migrant family has an equal right and need to receive the benefits of any reorientation.[1/] We feel the child of the migrant family has an equal right to eat.

[1/] Study of the Proposed Revisions makes it clear that those administrative provisions are aimed at urban schools with a fairly stable child population. The provisions for notification of the availability of food assistance programs, as well as those for supplying and collecting the applications for program assistance, are to be handled on a yearly basis (at the beginning of each school year). Clearly, this mechanism can work only in schools with stable populations.

SECTION V

A CALL TO ACTION

What we propose here today is not just community participation in the operation of programs, or greater funding levels, or a departmental or interdepartmental task force.

We call for a wholesale effort for reform, instituted and led by this Subcommittee, perhaps in conjunction with the standing Senate Operations Committee, to feret out the oppressors -- whether public or private persons -- and to hold them directly accountable for their illegal and immoral deeds. This Committee must expand functioning and staff or fund an appropriate organ -- to be an arm of this Congress -- to act as an ombudsman. It must short circuit the bureaucratic red tape and indifference, counter political pressure and vested interests such as agri-business, and the large farmers on the federal dole and their associations and cooperatives.

It must go beyond rhetoric and create the fulfillment of conditions, guaranteed to all other classes of Americans, that assure basic economic security, social and educational opportunity. Not only must migrant health and nutritional needs be met, but migrants must have the right to associate freely with one another and others, including community and labor organizers. Without this basic right, self-help is forever foreclosed.

If the migrant can earn a decent wage, have vocational and educational opportunity and be assured of an equal right to the political process -- a fair share of federal largess, plus a right to confront his bureaucratic and political oppressors -- then more general hearings will be unnecessary.

APPENDIX A

ANALYSIS OF DATA FROM AGRICULTURE

After the data furnished the Subcommittee on Migratory Labor by the U.S. Department of Agriculture in support of their responses to its interrogatories was made available to the public, the staff of the Migrant Research Project requested this data and made a detailed analysis thereof. A summary of conclusions drawn from this analysis is set forth below.

Our analysis of the data consisted of a review of the nationwide totals relating to the commodities program for the eleven month period between March 1969 and February 1970, and the state by state totals relating to the food stamp program for the nine month period between April 1969 and January 1970.

Our staff further made a selective analysis of all the data provided on the commodities and food stamp programs for the states of Texas and Michigan. This study covered the 35 month period between March 1967 and February 1970. We likewise made an analysis for the food stamp program for a six month period between January 1970 and June 1970.

This data, taken as a whole, can be criticized for being technically very weak. As an example, during the 12 month period of food stamp program data studied, an analyst discovered 36 errors in simple addition and transcription of the figures. That this was not an isolated incident was shown by the fact that, upon doing a more detailed analysis of the general food stamp data, the same staff member discovered 11 errors in either addition or transcription, plus another 10-12 entries that were completely missing.

The presence of these numerous errors unquestionably casts a great deal of doubt upon the entire data set provided in support of answers to some critical questions posed by the Subcommittee. In addition, there were at least three other problems in the physical presentation of the data that render it useless in terms of any understanding of the formulation of USDA policy that it might provide.

I. Lack of any definitions for the terms of classification.

Agriculture has divided up both its food stamp and its commodity data into a number of categories--i.e., cities receiving assistance, persons on public assistance receiving food stamps, etc.

These classifications are, of course, basic to persons wishing to gain basic information from the data. Yet the classification is deceptive in appearance, for though it appears to portray a certain situation, in reality it fails to provide any definition of the meaning of information which it purports to represent.

As an example of this problem is the following statement: In January of 1970, there were two cities receiving commodity distribution within the state of Texas. A question immediately arises as to what is meant by a city? Is a city thirty-five families living in a four mile area or three thousand-five hundred families living in a four block area?

Obvious problems arise from the lack of clear criteria or definitions, including: (1) lack of significance of the statistics, i.e., the analyst has no idea how much weight to give to a particular statistical representation; (2) lack of ability to make comparisons, i.e., the analyst has no way of knowing whether a statistical representation relating to the food stamp program is comparable to a representation under the same category relating to the commodity program; and (3) lack of ability to detect trends of increase or decrease within a category during a given time period.

II. Lack of any form of uniformity in presentation of the data.

Agriculture does not present its food stamp and its commodity data by the same method. While data relating to food stamps is presented in terms of county totals within a given state, data relating to commodities is presented in terms of state totals within the total nation.

Obviously, this lack of uniformity precludes comparison of the performance of the food stamp program against the commodities program. In addition, the lack of uniformity in presentation means that in those states which have a heavy influx of migrants, one can only estimate if migrants are being served in any given county where the state has a food stamp program; if the state has a commodity program, one is provided with only the gross state total which provides no way to estimate the proportion of migrants.

III. Lack of an auditing system to insure statistical validity.

As mentioned at the outset, the statistical representations obtained from Agriculture contained numerous errors in not only addition, but also in simple transcription of the figures from one month's report to the next.

The problem inherent in these errors is very serious when one considers that it is upon the basis of this incorrect information that Agriculture predicates future policy decisions to both the food stamp and commodity programs.

IV. Conclusion.

As the data now exists, any hypotheses the Department of Agriculture or anyone else might formulate and any conclusion drawn from the data would be definitionally insignificant, formatively inconsistent and statistically invalid.

APPENDIX B

REPORTED INCIDENTS INVOLVING PROBLEMS POOR PEOPLE HAVE HAD IN OBTAINING ENTREE TO AND FREE CARE IN McALLEN HOSPITAL, McALLEN, TEXAS, A NEW HOSPITAL CONSTRUCTED WITH HILL-BURTON FUNDS

While two of the most egregious practices detailed below (those involving bad checks and visa manipulation) have recently been discontinued,[1] this was not because of any supervisory action by HEW. Despite the fact that these practices have been reported to the persons in charge of administering Hill-Burton funds, no corrective action has been taken by them.

Case 1: The hospital administration often blocks attempts to pay bills, and the patient is forced to assume the burden of getting a loan and repaying it with interest: X had an operation in the McAllen Hospital. The bill came to $128.60. Hidalgo County Welfare Department agreed to pay part of the bill, actually a substantial part, but the hospital would not accept the money from the Welfare Department until the patient had paid his part. So the patient, who had no money at all, was offered the chance to sign a note agreeing to finance the bill, thereby obligating himself to the interest payments. County Welfare is sometimes helpful in paying a portion of the hospital costs, but it is standard practice for the hospital to refuse this money until the patient can pay his share (quite often less than half).

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[1] There are conflicting reports on this. Some reports indicate that these practices are still in effect, but in a greatly reduced fashion.

Case 2: X had an outstanding bill of $105.16 from the McAllen Hospital. As is their custom with many outstanding accounts, the hospital sold the note to a Collection agency. This agency is now barraging X with notices and threats, such as "PREPARATORY LISTING FOR CIVIL COURT." While some attorneys feel this is unauthorized practice of law, the debtor usually does not know this and is terrified by such a notice.

Case 3: /This practice, formerly in use by the hospital administration, is reported to have been recently discontinued./ The patient would be presented with a bill for his stay in the hospital. If unable to pay the full amount at that very moment, he would be asked by the business manager to sign a blank check from a bank in which he did not have an account. The business manager would convince the person that it was all right to sign, that it was just something like an agreement to pay when possible, etc. After the person signed, the business manager would inform him that he had written a bad check, that it was hot, and that he could be prosecuted and thrown in jail. The local District Attorney received 86 of these checks from the hospital. He told them he was not a collection agency and was not going to prosecute these people, and to stop this illegal practice. A Catholic priest, who was working in McAllen at the time and was involved in investigating this practice, reports that he personally saw two drawers full of these checks in the office of the hospital business manager.

Case 4: Another practice, recently discontinued, was to ask the patient for his green card (his immigration visa), just to check, and then keep it and tell the patient that he would be reported to the immigration authorities and probably deported if he did not pay the bill immediately. Although the patient was in no danger of being deported or put in jail, most patients never knew this. The patient would be forced to borrow the money from a finance company, often pawning all of his possessions to pay the hospital bill.

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Senator MONDALE. We stand in recess until tomorrow morning at 10 o'clock.

(Whereupon, at 2:40 p.m. the subcommittee recessed, to reconvene at 10 a.m. of the following day, Tuesday, July 21, 1970.)